STIC
Scientific and Technical
Information Center

Search Report
EIC 3600

STIC Database Tracking Number: 297718

To: Amber Altschul
Location: KNX 5D75
Art Unit: 3686
Date: 6/3/2009
Case Serial Number: 10/682,157

From: Christian Miner
Location: EIC3600
KNX 4B68
Phone: (571) 272-3010
christian.miner@uspto.gov

Search Notes

Dear Examiner Altschul:

Please find attached the results of your search for the above-referenced case. The search was conducted in Dialog, LexisNexis, Proquest, and EBSCOhost.

I have listed *potential* references of interest in the first part of the search results. However, please be sure to scan through the entire report. There may be additional references that you might find useful.

If you have any questions about the search, or need a refocus, please do not hesitate to contact me.

Thank you for using the EIC, and we look forward to your next search!

I. POTENTIAL REFERENCES OF INTEREST 3

A. Dialog 3

B. Additional Resources Searched 11

II. INVENTOR SEARCH RESULTS FROM DIALOG 12

III. TEXT SEARCH RESULTS FROM DIALOG 21

A. Patent Files, Abstract 21

B. Patent Files, Full-Text 28

IV. TEXT SEARCH RESULTS FROM DIALOG 42

A. NPL Files, Abstract 42

B. NPL Files, Full-text 61

V. ADDITIONAL RESOURCES SEARCHED 77

I. Potential References of Interest

A. Dialog

Dialog eLink: Order File History
12/5/1 (Item 1 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0014751570
WPI Acc no: 2005-099201/200511
XRAM Acc no: C2005-033211
XRPX Acc No: N2005-086076
System for analyzing the consumption habits of a consumer comprises a data processor for receiving and correlating information regarding a consumable identifier and consumption from two databases
Patent Assignee: MOORE S J (MOOR-I)
Inventor: MOORE S J

Patent Family (1 patents, 1 countries)

Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
US 20040267098	A1	20041230	US 2002144501	A	20020513	200511	B

Priority Applications (no., kind, date): US 2002144501 A 20020513

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes
US 20040267098	A1	EN	13	6	

Alerting Abstract US A1
NOVELTY - A computer-assisted system for analyzing the consumption habits of a consumer comprises:

i. a database for storing a consumable identifier correlated with consumption information;
ii. a second database for storing a consumable identifier correlated with amount of each consumable consumed by a consumer, time of consumption of consumable, and physiological parameters; and
iii. a data processor.

DESCRIPTION - A computer-assisted system for analyzing the consumption habits of a consumer comprises:

i. a first database for storing consumable identifier correlated with consumption information;
ii. a second database for storing consumable identifier correlated with amount of each consumable consumed by consumer, time of consumption of consumable, and physiological parameters; and
iii. a data processor for receiving and correlating the information from the two databases.

The information is nutritional information, ingredient or ingredient information.
An INDEPENDENT CLAIM is included for providing a consumer of foodstuffs with a device for adjudging nutritional status.
USE - For analyzing the consumption habits of consumables (e.g. foodstuff, drug, pre-packaged good) of consumer

(claimed).
ADVANTAGE - The system adjudges the effect of consumable intakes, such as the amount of calories, fat, protein, carbohydrate, minerals and **vitamins** consumed **daily** or the **amount** of **drug** ingested daily, **physiological parameters** such as weight, **blood** glucose **levels** or red blood cell **count**.

Title Terms /Index Terms/Additional Words: SYSTEM; CONSUME; HABIT; COMPRISE; DATA; PROCESSOR; RECEIVE; CORRELATE; INFORMATION; IDENTIFY; TWO

Class Codes

International Patent Classification					
IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
A47G-0019/22	A	I		R	20060101
G06F-0019/00	A	I		R	20060101
G09F-0019/02	A	I		R	20060101
A47G-0019/22	C	I		R	20060101
G06F-0019/00	C	I		R	20060101
G09F-0019/00	C	I		R	20060101

ECLA: A47G-019/22B6, G06F-019/00M3P, G09F-019/02
ICO: K47G-019:22B6T, S06F-019:00M5P
US Classification, Current Main: 600-300000; Secondary: 128-920000
US Classification, Issued: 600300, 128920
File Segment: CPI; EngPI; EPI
DWPI Class: B04; B07; T01; P31
Manual Codes (EPI/S-X): T01-N01A2C; T01-N01E1
Manual Codes (CPI/A-N): B04-B04D5; B10-A07; B11-C11; B12-K04A

Dialog eLink: Order File History
12/5/2 (Item 2 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0010300861 *Drawing available*
WPI Acc no: 2000-614710/200059
XRAM Acc no: C2000-184385
XRPX Acc No: N2000-455328
Drug dispensing and monitoring apparatus used in field of medical care or health care, has alarm to inform quantity of drug to be consumed
Patent Assignee: IBM CORP (IBMC)
Inventor: LAWRENCE; THOMAS

Patent Family (1 patents, 1 countries)							
Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
JP 2000217888	A	20000808	JP 200015807	A	20000125	200059	B

Priority Applications (no., kind, date): US 1999240347 A 19990129

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes
JP 2000217888	A	JA	11	5	

Alerting Abstract JP A
NOVELTY - A container (10) which stores drug is equipped with a dispenser for dispensing small quantities of drug. A **monitoring** system (20) such as a computer, **monitors** the **amount** of **drug** dispensed by the dispenser which is connected to internet. An alarm (92) is provided for informing the exact **quantity** of **drug** to be **consumed**.
USE - Used in the field of medical care or health care for dispensing pills to old persons.
ADVANTAGE - Enables the old person to have information about **pills** and their consumption **quantity** as **monitoring** system regulates dispersion of the **amount** of **drug** required as per **prescription**.
DESCRIPTION OF DRAWINGS - The figure shows block circuit diagram of monitoring system.
10 Container
20 Monitoring system
92 Alarm

Title Terms /Index Terms/Additional Words: DRUG; DISPENSE; MONITOR; APPARATUS; FIELD; MEDICAL; CARE; HEALTH; ALARM; INFORMATION; QUANTITY; CONSUME

Class Codes

International Patent Classification

IPC	Class Level	Scope	Position	Status	Version Date
A61J-0007/04	A	I	F	R	20060101
G06F-0019/00	A	I		R	20060101
G06Q-0050/00	A	I	L	R	20060101
A61J-0007/00	C	I	F	R	20060101
G06F-0019/00	C	I		R	20060101
G06Q-0050/00	C	I	L	R	20060101

Japan National Classification FI Terms

FI Term	Facet	Rank	Type
A61J-007/00 Q			
G06F-015/42 M			
G06F-017/60 126 N			

5L099 Japan National Classification F Terms

Theme	ViewPoint + Figure	Additional Code
4C047		

File Segment: CPI; EngPI; EPI
DWPI Class: B07; T01; P33
Manual Codes (EPI/S-X): T01-J
Manual Codes (CPI/A-N): B11-C03

Dialog eLink: Order File History
12/5/3 (Item 3 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0010184843 *Drawing available*
WPI Acc no: 2000-494731/200044
XRPX Acc No: N2000-367534
Medicine distribution-sales management apparatus, issues account settlement document and receipt based on stored customer name, medicine name, amendment number and number of returned medicines
Patent Assignee: DOCTOR SCHMITT KK (SCHM-N)
Inventor: TANAKA T

Patent Family (1 patents, 1 countries)							
Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
JP 2000187697	A	20000704	JP 1998363331	A	19981221	200044	B

Priority Applications (no., kind, date): JP 1998363331 A 19981221

Patent Details					
Patent Number	**Kind**	**Lan**	**Pgs**	**Draw**	**Filing Notes**
JP 2000187697	A	JA	9	4	

Alerting Abstract JP A
NOVELTY - The portable information terminal (10) carried by sales man, has memory in which customer identification number and name is stored. Account settlement **document** and receipt are issued based on name, name of **medicine** customer and amendment **number** and **number** of **returned medicines**. Based on issued account settlement **document**, payment amount information is input and total sales amount is calculated.
DESCRIPTION - An INDEPENDENT CLAIM is also included for medicine distribution-sales management method.
USE - For managing medicine distribution and sales.
ADVANTAGE - Since account settlement document and receipt are issued, information regarding sales management can be confirmed easily. Since sales management information regarding required medicine distribution is stored in memory of the portable information terminal, it can be copied to the other storage medium such as floppy disk etc.
DESCRIPTION OF DRAWINGS - The figure shows perspective diagram of portable information terminal.
10 Portable information terminal

Title Terms /Index Terms/Additional Words: MEDICINE; DISTRIBUTE; SALE; MANAGEMENT; APPARATUS; ISSUE; ACCOUNT; SETTLE; DOCUMENT; RECEIPT; BASED; STORAGE; CUSTOMER; NAME; AMEND; NUMBER; RETURN

Class Codes

International Patent Classification					
IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
G06F-0019/00	A	I	[illegible]	R	20060101
G06Q-0010/00	A	I	F	R	20060101
G06Q-0030/00	A	I	L	R	20060101

G06Q-0050/00	A	I	L	R	20060101			
G06F-0019/00	C	I		R	20060101			
G06Q-0010/00	C	I	F	R	20060101			
G06Q-0030/00	C	I	L	R	20060101			
G06Q-0050/00	C	I	L	R	20060101			

Japan National Classification FI Terms

FI Term	Facet	Rank	Type
G06F-015/21 Z			
G06F-015/22 A			
G06F-017/60 126 N			
G06F-017/60 332			
G06F-017/60 506			
G06F-019/00 300 A			

Japan National Classification F Terms

Theme	ViewPoint + Figure	Additional Code
5B049		
5B090		
5L099		
5B049	AA06	
5B049	BB11	
5B049	CC00	
5B049	CC08	
5B049	DD05	
5B049	EE02	
5B049	EE05	
5B049	FF02	
5B049	FF04	
5B049	FF07	
5B049	GG06	

File Segment: EPI;
DWPI Class: T01
Manual Codes (EPI/S-X): T01-J06A

Dialog eLink: Order File History
13/3K/13 (Item 7 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00853837

WIRELESS ELECTRONIC PRESCRIPTION SCANNING AND MANAGEMENT SYSTEM
SYSTEME DE GESTION ET DE LECTURE D'ORDONNANCES ELECTRONIQUE SANS FIL

Patent Applicant/Patent Assignee:

- **BIOTECH HOLDINGS LLC**; 4 Bypass Road, Suite 201, Salem, NJ 08079
  US; US(Residence); US(Nationality)

Legal Representative:

- **GERBER Monica R(agent)**
  Choate, Hall & Stewart, Exchange Place, 53 State Street, Boston, MA 02109; US;

	Country	**Number**	**Kind**	**Date**
Patent	WO	200186574	A2-A3	20011115
Application	WO	2001US13981		20010501
Priorities	US	2000562386		20000501

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE; TR;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GW; ML;
MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; MZ; SD; SL; SZ; TZ;
UG; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;

Main International Patent Classes (Version 7):

IPC	**Level**
<B>G06F-019/00</B>	Main

Language Publication Language:	English
Filing Language:	English
Fulltext word count:	24311

Detailed Description:

...the end of the encounter to be very rushed, particularly if the physician feels that he or she has fallen behind. the planned schedule. Most **experienced** physicians have long since memorized names, doses, etc., for medications that they prescribe frequently. Physicians will not be willing to adopt a system that requires...generated for each prescription. The reference number is stored in the prescription information record and serves as the key into the database to uniquely identify the **record** with which it is associated. The reference **number** is used to access the **prescription** information, thus providing a single identifier by which the prescription information can be viewed, checked, updated, or analyzed by individuals who, are authorized to do...an outpatient setting prescribing a medication provided in the form of pills, tablets, etc. However, it is equally possible to use the system in other **health** care settings such as with hospitalized patients and with other forms of medications, e.g., liquids, creams, ointments, etc., to be administered by the patient...The bar code reference number, which is generated for each prescription, is used as the key to the table. The 'fill number' field maintains a **count** of the **number** of times the **prescription** has been filled by a pharmacist and is used to ensure that a prescription is not refilled beyond the **number** of times allowed by the prescriber. In addition, by keeping track of the **number** of times the **prescription** has been filled it is possible to minimize the potential for fraud (e.g., photocopying prescription tickets).

The 'valid' field is used to invalidate prescriptions...invention in which patient records are accessible by the server engine, the patient record can be updated as well.

The sample inventory table can be **used** by pharmaceutical sales representatives to keep **track** of the **number** of samples of any particular **medication** available at each. location. In certain embodiments of the invention sales representatives are provided with PDAs and are able to view and update the sample

Dialog eLink: USPTO Full Text Retrieval Options
12/5/5 (Item 3 from file: 73)
DIALOG(R)File 73: EMBASE
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0077257165 **EMBASE No:** 1998167323
Measurement of patient compliance

Paes A.H.P.; Bakker A.; Soe-Agnie C.J.
Dept. Pharmacoepidemiology P., Universiteit Utrecht, PO Box 80082, 3508 TB Utrecht, Netherlands
Corresp. Author/Affil: Paes A.H.P.: Pharmacoepidemiol./Pharmacother Dept, Universiteit Utrecht, PO Box 80082, 3508 TB Utrecht, Netherlands

Pharmacy World and Science (Pharm. World Sci.) (Netherlands) June 29, 1998 , 20/2 (73-77)
CODEN: PWSCE **ISSN:** 0928-1231
Item Identifier (DOI): 10.1023/A:1008663215166
Document Type: Journal ; Article **Record Type:** Abstract
Language: English **Summary language:** English
Number of References: 18

The compliance of 91 diabetic patients using oral antidiabetics was studied. Patient compliance was measured using four different methods. Patients received their medication in a Medication Event Monitoring System (MEMS)-container. Each time the patient went back to the **pharmacy** for refill **prescriptions**, the **number** of **tablets left** in the container were **counted**. **Pharmacy records** were used to study the number of days of delay in getting the next refill. At the end of the study, a questionnaire was sent to every patient. Using MEMS as a standard, the results show that pill count and refill data overestimate the compliance of this group of patients. The MEMS data also show that the compliance data using only the **number** of **tablets** may be biased, because of possible overconsumption. Pill **count** does not show a correlation with compliance as measured by MEMS. The relation between compliance as measured with MEMS and refill compliance is weak.

Drug Descriptors:
* oral antidiabetic agent--drug therapy--dt
Medical Descriptors:
* diabetes mellitus--drug therapy--dt; *patient compliance
adult; aged; article; drug monitoring; female; human; major clinical study; male; medical record; patient monitoring; pharmacy; prescription; questionnaire
SECTION HEADINGS:
Public Health, Social Medicine and Epidemiology
Endocrinology
Drug Literature Index

Dialog eLink: USPTO Full Text Retrieval Options
12/5/6 (Item 4 from file: 73)
DIALOG(R)File 73: EMBASE
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0075259451 **EMBASE No:** 1993038993
A reliable accounting system for controlled substances in the operating room

Schmidt K.A.; Schlesinger M.D.
Department of Anesthesiology, Hackensack Medical Center, 30 Prospect Avenue, Hackensack, NJ 07601, United States
Corresp. Author/Affil: Schmidt K.A.: Department of Anesthesiology, Hackensack Medical Center, 30 Prospect Avenue, Hackensack, NJ 07601, United States

Anesthesiology (ANESTHESIOLOGY) (United States) February 12, 1993 , 78/1 (184-190)
CODEN: ANESA **ISSN:** 0003-3022
Document Type: Journal ; Article **Record Type:** Abstract
Language: English **Summary language:** English

Background: Drug abuse is a leading occupational hazard for operating room personnel. Easy access to controlled substances allows drug dependence to develop and flourish. A system that accurately audits the distribution of controlled substances used in the operating room may decrease the onset of drug abuse and make it easier to identify drug addicts. A simple, inexpensive, and reliable system that improves accountability of controlled substances is described in detail. Methods: This system involves participation by anesthesiologists, operating room nurses, and **pharmacists** to accurately **record amount** and type of **drugs** dispensed, **used**, wasted, and **returned**. Periodic, random, qualitative, and quantitative analyses of drugs returned for wastage are performed. Results: In the first 6 months in which the system was used, 6,336 patients were treated and 7,182 ampules of controlled substances were dispensed. Thirty-seven incident reports describing deviations from the protocol occurred. In each case an explanation for the discrepancy was determined and compliance with the protocol was subsequently improved. No cases of drug diversion were discovered or suspected. Conclusions: The system described is simple and inexpensive to implement and has improved accountability for controlled substance management.

Medical Descriptors:
* drug control; *drug dependence--diagnosis--di; *drug dependence--prevention --pc; *operating room personnel
accounting; anesthesist; article; human; nurse; occupational hazard; pharmacist; priority journal
SECTION HEADINGS:
Anesthesiology
Drug Dependence, Alcohol Abuse and Alcoholism

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25/3,K/16 (Item 1 from file: 149)
DIALOG(R)File 149: TGG
```

Health&Wellness DB(SM)
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reserved.

01783402 **Supplier Number:**
20940972 (USE FORMAT 7 OR 9 FOR FULL TEXT)

Optimization of medication use in the elderly population.(Tips From Other Journals)

Sadovsky, Richard

American Family Physician , v58 , n1 ,
p245(1)
July ,
1998
Publication Format:
Magazine/Journal; Refereed
ISSN: 0002-838X
Language: English

Record Type: Fulltext **Target Audience:** Professional

Word Count: 553 **Line Count:** 00052
...as the principal cause of inappropriate polypharmacy. Strategies for preventing the problem focus on improving-communication between physicians and patients with regard to the exact **number** and type of **medications used**, the use of a single **pharmacy** or **pharmacy network** and regular, comprehensive medication reviews.

Inadequate dosage or omission of an appropriate prescription is another common problem. Inadequate dosage has been reported with calcium supplements...

B. Additional Resources Searched

Financial Times FullText (via ProQuest): No relevant results.

Internet & Personal Computing Abstracts (via EBSCOhost): No relevant results.

LexisNexis: see attached file.

II. Inventor Search Results from Dialog

Dialog eLink: Order File History
27/5/1 (Item 1 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0014412883 *Drawing available*
WPI Acc no: 2004-602864/200458
XRPX Acc No: N2004-476824
Pharmacy data processing method, involves reviewing claim received from pharmacy based on preset criteria to send approval or rejection notification to pharmacy that corrects non-conforming claim portion through electronic network
Patent Assignee: KALIES R F (KALI-I)
Inventor: **KALIES R F**

Patent Family (1 patents, 1 countries)							
Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
US 20040148198	A1	20040729	US 2003439758	P	20030113	200458	B
			US 2004756608	A	20040113		

Priority Applications (no., kind, date): US 2003439758 P 20030113; US 2004756608 A 20040113

Patent Details						
Patent Number	**Kind**	**Lan**	**Pgs**	**Draw**	**Filing Notes**	
US 20040148198	A1	EN	9	2	Related to Provisional	US 2003439758

Alerting Abstract US A1
NOVELTY - The method involves reviewing a claim received from a pharmacy (4000) at a processing center (3000) based on preset criteria. One of an approval or rejection notification is send to **pharmacy** through an **electronic** communication **network**. The **pharmacy** corrects a non-conforming portion of the claim and transmits it to the center. The claim review and approval or rejection steps are repeated until the claim conforms to criteria.
DESCRIPTION - The claimed order is fulfilled and an invoice corresponding to the filled prescription is transmitted from the pharmacy to a healthcare facility for accepted claims. The claim review criteria include items such as contractual terms, patient information review, prescription price, formulary compliance with healthcare facility`s plan, drug utilization review (DRR) and drug regimen review (DUR) reviews.
USE - Used for processing pharmacy data.
ADVANTAGE - The method ensures that all healthcare facilities subscribing to a prescription benefit manager (PBM) and part of a national account, being serviced by various pharmacies within the PBM, are provided with consistent pricing, review, and adjudication of prescription claims. The **online** communications between the processing center and the participating **pharmacies** enable the pharmacies to obtain rapid feedback regarding the prescription`s pricing and therapeutic appropriateness for the patient. The pharmacies also benefit from the reduced time required to ensure plan compliance and make corrections. The patient benefits from the PBM`s DUR and DRR reviews, while avoiding potentially harmful drug reactions and interactions. The patient also benefits indirectly from the PBM`s cost-containment activities, which serve to minimize health-care plan increases. The managed care organization (MCO) benefits from the PBM`s cost-containment procedures and increased subscriber satisfaction.
DESCRIPTION OF DRAWINGS - The drawing shows a block diagram of a method for processing pharmacy data.
1000 Healthcare facility
2000 Electronic communication network
3000 Processing center
4000 Pharmacy

Title Terms /Index Terms/Additional Words: PHARMACEUTICAL; DATA; PROCESS; METHOD; CLAIM ; RECEIVE; BASED; PRESET; CRITERIA; SEND; APPROVE; REJECT; NOTIFICATION; CORRECT; NON; CONFORM; PORTION; THROUGH; ELECTRONIC; NETWORK

Class Codes

International Patent Classification

IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
G06Q-0010/00	A	I		R	20060101
G06Q-0010/00	C	I		R	20060101

ECLA: G06Q-010/00F
US Classification, Current Main: 705-002000
US Classification, Issued: 7052
File Segment: EPI;
DWPI Class: S05; T01; W01
Manual Codes (EPI/S-X): S05-G02G; T01-D01; T01-N01D; T01-N02B1; W01-A05B

Dialog eLink: Order File History
27/5/2 (Item 2 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0014156047 *Drawing available*
WPI Acc no: 2004-340977/200431
XRPX Acc No: N2004-272488
Pharmacy data assimilating and usage system using Internet, acquires information regarding actual consumption of medication, from dispensing data and data relating to total amount of medication
Patent Assignee: KALIES R F (KALI-I); OMNICARE INC (OMNI-N)
Inventor: **KALIES R F**

Patent Family (4 patents, 104 countries)

Patent Number	**Kind**	**Date**	**Application Number**	**Kind**	**Date**	**Update**	**Type**
WO 2004034217	A2	20040422	WO 2003US31945	A	20031008	200431	B
US 20040148196	A1	20040729	US 2002416798	P	20021008	200450	E
			US 2003682157	A	20031008		
AU 2003277319	A1	20040504	AU 2003277319	A	20031008	200465	E
AU 2003277319	A8	20051103	AU 2003277319	A	20031008	200629	E

Priority Applications (no., kind, date): US 2002416798 P 20021008; US 2003682157 A 20031008

Patent Details

Patent Number	**Kind**	**Lan**	**Pgs**	**Draw**	**Filing Notes**
WO 2004034217	A2	EN	17	3	

National Designated States,Original	AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE EG ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NI NO NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG UZ VC VN YU ZA ZM ZW					
Regional Designated States,Original	AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW					
US 20040148196	A1	EN			Related to Provisional	US 2002416798
AU 2003277319	A1	EN			Based on OPI patent	WO 2004034217
AU 2003277319	A8	EN			Based on OPI patent	WO 2004034217

Alerting Abstract WO A2
NOVELTY - An extraction unit extracts dispensing data and usage data indicating **total amount** of **medication** for selected **prescription**, from the prescription transaction record gathered by a pharmacy. The information regarding sources of medication fulfilling the prescription and actual consumption of medication attributable to the source, is acquired from the extracted data.
USE - For assimilating and using pharmacy data related to prescriptions gathered by publicly held corporate **pharmacies connected** to each other through **electronic network** such as **Internet** , **intranet**, computer network, facsimile.
ADVANTAGE - Actual consumption data is accurately determined using simple and reliable system.
DESCRIPTION OF DRAWINGS - The figure shows the flow diagram of pharmacy data assimilating and storing system.

Title Terms /Index Terms/Additional Words: PHARMACEUTICAL; DATA; ASSIMILATE; SYSTEM; ACQUIRE; INFORMATION; ACTUAL; CONSUME; MEDICATE; DISPENSE; RELATED; TOTAL; AMOUNT

Class Codes

International Patent Classification					
IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
G06F-017/60			Main		"Version 7"
G06F-017/30			Secondary		"Version 7"
G06F-0019/00	A	I		R	20060101
G06Q-0010/00	A	I		R	20060101
G06F-0019/00	C	I		R	20060101
G06Q-0010/00	C	I		R	20060101

ECLA: G06F-019/00M3M, G06F-019/00M5R, G06F-019/00M5S, G06F-019/00M5Y, G06Q-010/00F
ICO: S06F-019:00M3D, S06F-019:00M3F, S06F-019:00M5R3
US Classification, Current Main: 705-002000
File Segment: EPI;
DWPI Class: S05; T01; X25
Manual Codes (EPI/S-X): S05-G02G; S05-M01; T01-J06A1; T01-N01A2A; T01-N01A2C; T01-N01D; X25-P02

Dialog eLink: Order File History
27/5/3 (Item 3 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0014156046 *Drawing available*
WPI Acc no: 2004-340976/200431
XRPX Acc No: N2004-272487
Pharmacy data processing and organizing system for e.g. publicly-held corporate pharmacy, stores records having error in exception file for correction, and places records without defects in common format into data warehouse
Patent Assignee: KALIES R F (KALI-I); OMNICARE INC (OMNI-N)
Inventor: **KALIES R E**; **KALIES R F**

Patent Family (5 patents, 104 countries)

Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
WO 2004034215	A2	20040422	WO 2003US31943	A	20031008	200431	B
AU 2003282504	A1	20040504	AU 2003282504	A	20031008	200465	E
US 20050071193	A1	20050331	US 2002416810	P	20021008	200524	E
			US 2003681955	A	20031008		
AU 2003282504	A8	20051103	AU 2003282504	A	20031008	200629	E
US 7165077	B2	20070116	US 2002416810	P	20021008	200706	E
			US 2003681955	A	20031008		

Priority Applications (no., kind, date): US 2002416810 P 20021008; US 2003681955 A 20031008

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes	
WO 2004034215	A2	EN	19	4		
National Designated States,Original	AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE EG ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NI NO NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG UZ VC VN YU ZA ZM ZW					
Regional Designated States,Original	AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW					
AU 2003282504	A1	EN			Based on OPI patent	WO 2004034215
US 20050071193	A1	EN			Related to Provisional	US 2002416810
AU 2003282504	A8	EN			Based on OPI patent	WO 2004034215
US 7165077	B2	EN			Related to Provisional	US 2002416810

Alerting Abstract WO A2
NOVELTY - Data sources (10) assemble batch files (12) comprising header (14), pharmacy record (16) and trailer (18). Assembled batch files transmitted to processor (20) are checked for validity, and then stored in database (24). Records having error such as relational integrity is noted in exception file and held for correction, while records without defects are placed in common format and loaded into data warehouse (26).
USE - For publicly-held corporate pharmacy (PCP), health care facility, medical facility.

ADVANTAGE - Efficiently collects pharmacy records from various sources, resolving problems with faulty or incomplete records, and facilitates querying and analysis.
DESCRIPTION OF DRAWINGS - The figure shows a flow diagram illustrating the collection of pharmacy data from various sources.
10 data sources
12 batch files
14 header
20 data processor

Title Terms /Index Terms/Additional Words: PHARMACEUTICAL; DATA; PROCESS; ORGANISE; SYSTEM; HELD; STORAGE; RECORD; ERROR; FILE; CORRECT; PLACE; DEFECT; COMMON; FORMAT; WAREHOUSE

Class Codes

International Patent Classification

IPC	Class Level	Scope	Position	Status	Version Date
G06F-017/30; G06F-017/60			Main		"Version 7"
G06F-0017/30	A	I	F	B	20060101
G06F-0019/00	A	I		R	20060101
G06F-0017/30	C	I		B	20060101
G06F-0019/00	C	I		R	20060101

ECLA: G06F-019/00M5R3
ICO: S06F-019:00M5P, S06F-019:00M5Y
US Classification, Current Main: 705-002000, 707-104100
US Classification, Issued: 7052, 707104.1
File Segment: EPI;
DWPI Class: T01
Manual Codes (EPI/S-X): T01-F05E; T01-J05A2B; T01-J05B1

Dialog eLink: Order File History
27/5/4 (Item 4 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0013903762 *Drawing available*
WPI Acc no: 2004-083217/200408
XRPX Acc No: N2004-066471
Prescription benefits providing method, involves identifying sponsor for prescription benefits plan, identifying subscriber with valid credit account and establishing prescription benefit manager to administer plan
Patent Assignee: KALIES R F (KALI-I); OMNICARE INC (OMNI-N)
Inventor: **KALIES R F**

Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
AU 2003247744	A1	20040119	AU 2003247744	A	20030627	200447	E
WO 2004003692	A2	20040108	WO 2003US20326	A	20030627	200408	B
US 20040073457	A1	20040415	US 2002392066	P	20020627	200426	E
			US 2003608265	A	20030627		

Priority Applications (no., kind, date): US 2002392066 P 20020627; US 2003608265 A 20030627

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes	
WO 2004003692	A2	EN	28	3		
National Designated States,Original	AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX MZ NO NZ OM PG PH PL PT RO RU SC SD SE SG SK SL SY TJ TM TN TR TT TZ UA UG UZ VC VN YU ZA ZM ZW					
Regional Designated States,Original	AT BE BG CH CY CZ DE DK EA EE ES FI FR GB GH GM GR HU IE IT KE LS LU MC MW MZ NL OA PT RO SD SE SI SK SL SZ TR TZ UG ZM ZW					
US 20040073457	A1	EN			Related to Provisional	US 2002392066
AU 2003247744	A1	EN			Based on OPI patent	WO 2004003692

Alerting Abstract WO A2

NOVELTY - The method involves identifying a sponsor for a prescription benefits plan with formulary of preferred medications. A subscriber with valid credit account, wishing to participate in the plan is identified and enrolled. A prescription benefit manager (30) is established to administer the plan. One payment is made by creditor to the manager. Two payments are made by the manager to respective pharmacy and claims processor.

USE - Used for providing prescription benefit to a subscriber.

ADVANTAGE - The method facilitates to ensure proper discounting of the prescriptions purchased under the plan, thereby ensuring patient advocacy and improving security healthcare costs for hospitalization and treatment of patients without increasing net cost of prescriptions to the patient.

DESCRIPTION OF DRAWINGS - The drawing shows a block diagram of a discount prescription benefit card program.

20 Patient
30 Prescription benefit manager
70 Credit card clearing house
100 Service agreement
110 Enrollment

Title Terms /Index Terms/Additional Words: PRESCRIBED; BENEFICIAL; METHOD; IDENTIFY; PLAN; SUBSCRIBER; VALID; CREDIT; ACCOUNT; ESTABLISH; MANAGE; ADMINISTER

Class Codes

International Patent Classification

IPC	Class Level	Scope	Position	Status	Version Date
G06F-017/60			Main		"Version 7"
G06F-0019/00	A	I		R	20060101
G06Q-0010/00	A	I		R	20060101
G06Q-0020/00	A	I		R	20060101
G06F-0019/00	C	I		R	20060101
G06Q-0010/00	C	I		R	20060101
G06Q-0020/00	C	I		R	20060101

ECLA: G06F-019/00M3M, G06F-019/00M5P1, G06F-019/00M5Y, G06Q-010/00F, G06Q-020/00, G06Q-020/00K1,

G06Q-020/00K4P
ICO: S06F-019:00M5R3
US Classification, Current Main: 705-002000
US Classification, Issued: 7052
File Segment: EPI;
DWPI Class: S05; T01
Manual Codes (EPI/S-X): S05-G02G; S05-M01; T01-J06A1

Dialog eLink: Order File History
14/3K/1 (Item 1 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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01112193

SYSTEM FOR ASSIMILATING AND USING PHARMACY DATA
SYSTEME POUR L'ASSIMILATION ET L'UTILISATION DE DONNEES DE PHARMACIES

Patent Applicant/Patent Assignee:

- **OMNICARE INC**; 1600 RiverCenter II, 100 East RiverCenter Boulevard, Covington, KY 41011 US; US(Residence); US(Nationality)

Legal Representative:

- **LIENESCH Theodore D(et al)(agent)**
  Thompson Hine LLP, 2000 Courthouse Plaza NE, 10 West Second Street, Dayton, OH 45402-1758; US;

	Country	Number	Kind	Date
Patent	WO	200434217	A2-A3	20040422
Application	WO	2003US31945		20031008
Priorities	US	2002416798		20021008

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; BG; CH; CY; CZ; DE; DK; EE; ES;
FI; FR; GB; GR; HU; IE; IT; LU; MC; NL;
PT; RO; SE; SI; SK; TR;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GQ; GW;
ML; MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; MZ; SD; SL; SZ; TZ;
UG; ZM; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;

Language Publication Language:	English
Filing Language:	English
Fulltext word count:	4708

Detailed Description:

SYSTEM FOR ASSIMILATING AND **USING** PHARMACY DATA
FIELD OF THE INVENTION
This invention relates to a system for managing pharmacy data. Specifically, the invention relates to a system for assimilating ... ...efficiently and accurately computing medication dispensing and usage data and making the information available for a variety of medical and economic analyses, including determining the **amount** of **medications** actually consumed by the members participating in a PCP. Transaction **records** are correlated and matched for a particular patient prescription to obtain an accurate account of the brands and quantities of medications used to fulfill the... ...data is accumulated into a summary report at s 104a-c. The summary report may provide such information as the number of transactions for each **prescription**, the quantity of medicine dispensed, discarded or returned in each transaction, and the **total quantity** of **medicine** dispensed and/or returned. The process of **extracting** and accumulating data at slOOa-c through s104a-c continues until all records have been checked at slO6a-c. At s108, the summary reports from... ...termed the "Computation Process," an analysis s217 may obtain a predetermined set of transaction data from data warehouse 212 via web server 215. Each transaction **record** is then analyzed to determine the **total amount** of **medicine** actually **consumed** for a selected medication, such as a brand of medication, taking into account **such** factors as the total amount of medicine dispensed and the total amount of unused medicine returned or otherwise unused. The actual consumption data of each

Dialog eLink: USPTO Full Text Retrieval Options
7/5,K/1 (Item 1 from file: 15)
DIALOG(R)File 15: ABI/Inform(R)
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01439770 00-90757
Cost-effective health care: New data

Kalies, Ralph F
Employee Benefits Journal v22n2 pp: 5-9
Jun 1997
ISSN: 0361-4050 **Journal Code:** EBJ
Document Type: Journal article **Language:** English **Length:** 5 Pages

Abstract:
The key to health care programs that meet their goals is to integrate data, coordinate care and ensure a patient-centered, not cost-centered, focus. Then the purchaser can achieve the desired decrease in cost of care, increase in quality of care, improvement in quality of life, improvement in job performance, decrease in disability and decrease in absenteeism.

Geographic Names: US

Descriptors: Health care expenditures; Benefit cost analysis; Group health insurance; Performance evaluation
Classification Codes: 9190 (CN=United States); 6400 (CN=Employee benefits & compensation); 3100 (CN=Capital & debt management)
Kalies, Ralph F

Dialog eLink: USPTO Full Text Retrieval Options
7/5,K/2 (Item 2 from file: 15)
DIALOG(R)File 15: ABI/Inform(R)

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00311103 86-11517

Technology, Friend or Foe?

Kalies, Ralph

Drug Topics v130n5 pp: 15-19
Mar 10, 1986
CODEN: DGTNA7
ISSN: 0012-6616 **Journal Code:** RXT
Document Type: Journal article **Language:** English **Length:** 5 Pages
Special Feature: Diagrams

Abstract:

Basic elements of current computer technology and robotics are explored. Computer technology can be divided into 2 main areas: hardware and software. Hardware is the machinery itself; software basically represents the instructions to the hardware. Robotics imitates human functions by means of a mechanical device with a brain-like microprocessor. The rapid changes in computer technology and robotics make it difficult for the practicing pharmacist who is interested in exploring the purchase and use of computer equipment. The 3 most important steps in selecting a computer system are: 1. finding software that will meet identified needs, 2. selecting hardware with which the software is compatible, and 3. considering the service and support available for the system. In utilizing the computer system, pharmacists should: 1. institute a systematic, automated plan for pricing and build a database, and 2. not underutilize the system.

Descriptors: Technological change; Pharmacies; Impacts; Computer based; Information processing; Information systems; Software; Robots; Trends; Automation
Classification Codes: 8390 (CN=Retailing industry); 5210 (CN=Office automation); 5220 (CN=Data processing management)

Kalies, Ralph

III. Text Search Results from Dialog

A. Patent Files, Abstract

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File 350:Derwent WPIX 1963-2009/UD=200933
         (c) 2009 Thomson Reuters
File 347:JAPIO Dec 1976-2009/Jan(Updated 090503)
         (c) 2009 JPO & JAPIO


Set     Items   Description
S1      26463   (AMOUNT OR NUMBER OR QUANTITY OR TOTAL OR HOW()(MANY OR MUCH)) (5N)
(MEDICATION? ? OR MEDICIN?? OR MEDICAMENT? ? OR DRUG? ? OR PILL? ? OR TABLET? ? OR
BOLUS OR MED OR MEDS OR CAPSULE? ? OR VITAMIN? ? OR SUPPLEMENT? ? OR PHARMACEUTICAL
OR PRESCRIPTION? ?)
S2       1500   S1 (10N) (MONITOR??? OR COUNT??? OR RECORD??? OR CAPTUR??? OR
TRACK??? OR DOCUMENT??? OR LOG OR LOGS OR EXTRACT???)
S3        433   S1 (10N) ((GIV??? OR BRING??? OR BROUGHT OR TAK??? OR TOOK OR
SEND???)(2W)BACK OR RETURN??? OR LEFT OR REMAIN??? OR CONSUMED)
S4         49   S1 (10N) ("NOT" OR WASN()T OR DIDN()T)(3N)(USED OR CONSUMED OR
TAKEN OR FINISHED OR UTILI?ED)
S5        862   (PHARMACY OR PHARMACIES OR DRUGSTORE? ? OR DRUG()(STORE? ? OR
CHAIN? ? OR OUTLET? ?) OR APATHECAR??? OR PHARMACIST? ? OR CHEMIST? ? OR
DISPENSARIES) (10N) (CONNECT??? OR LINK??? OR SHAR??? OR INTERCONNECT??? OR
INTERLINK??? OR NETWORK??? OR INTERNET OR INTRANET OR FAX??? OR FACSIMILE??? OR
ELECTRONIC? OR ONLINE OR ON()LINE OR WEBSITE? ? OR WEBPAGE? ? OR HOMEPAGE? ? OR WEB
OR SITE? ? OR PLATFORM? ? OR PORTAL? ? OR REALTIME OR REAL()TIME OR INTERACTIVE OR
DYNAMIC)
S6          9   AU=(KALIES, R? OR KALIES R? OR KALIES (1N) (R OR RALPH))
S7    1662857   IC=(G06F OR G06Q)
S8         50   S2 AND (S3 OR S4)
S9          2   S8 AND S5
S10        48   S8 NOT S9
S11        25   S10 NOT AY>2002
S12         5   S11 AND S7
S13        45   S2 (S) (S3 OR S4)
S14         2   S13 AND S5
S15         0   S14 NOT (S9 OR S12)
S16        39   S13 NOT (S9 OR S12)
S17        20   S16 NOT AY>2002
S18         0   S17 AND S7
S19      1500   S1 AND S2
S20        48   S19 AND S3
S21         1   S20 AND S4
S22         1   S21 NOT (S9 OR S12)
S23         0   S22 AND S5
S24        25   S5 AND S2
S25         2   S24 AND (S3 OR S4)
S26         0   S25 NOT (S9 OR S12)
S27         4   S6 AND (S1 OR S5)
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Dialog eLink: Order File History
9/5/1 (Item 1 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0014663610 *Drawing available*
WPI Acc no: 2005-011191/200501
Related WPI Acc No: 2006-556706
XRAM Acc no: C2005-003046
XRPX Acc No: N2005-008962

Drug sample fulfillment platform for distributing pharmaceutical drugs, comprises a drug sample web site for mating with a portal, and a request database for receiving requests of a prescriber through a drug sample web site

Patent Assignee: BURROWS S T (BURR-I); CHROBUCK T (CHRO-I); HECTOR Z K (HECT-I); KING S M (KING-I); KOST C (KOST-I); MEDMANAGE SYSTEMS INC (MEDM-N); SINGER S E (SING-I); TOVREA D V (TOVR-I)
Inventor: BURROWS S T; CHROBUCK T; HECTOR Z K; KING S M; KOST C; SINGER S E; TOVREA D V

Patent Family (2 patents, 2 countries)

Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
US 20040236630	A1	20041125	US 2003472956	P	20030522	200501	B
			US 2003674904	A	20030930		
CA 2467996	A1	20041122	CA 2467996	A	20040521	200501	E

Priority Applications (no., kind, date): US 2003472956 P 20030522; US 2003674904 A 20030930

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes	
US 20040236630	A1	EN	27	4	Related to Provisional	US 2003472956
CA 2467996	A1	EN				

Alerting Abstract US A1
NOVELTY - A drug sample fulfillment platform comprises:

i. a drug sample web site for mating with a portal, e.g. prescriber-oriented web portals, an e-detailing service, or a web site regarding a drug brand; and
ii. a request database for receiving requests of a prescriber through the drug sample web site.

DESCRIPTION - A drug sample fulfillment platform comprises:

i. a drug sample web site for mating with a portal, e.g. prescriber-oriented web portals, an e-detailing service, or a web site regarding a drug brand; and
ii. a request database for receiving requests of a prescriber through the drug sample web site.

The database responds to the prescriber by allowing the prescriber to print coupons or to print an order form for physical samples or pads of pre-printed vouchers.
INDEPENDENT CLAIMS are also included for:

1. a system for promoting pharmaceutical drugs, comprising a set of brand rules for guiding a distribution of drug samples of a drug, and the drug sample fulfillment platform for implementing the set of brand rules to allow a prescriber to obtain drug samples to dispense to a patient without the use of a sales representative;
2. a system for distributing pharmaceutical drugs, comprising the drug sample fulfillment platform for accessing drug sample services, and a first set of Web pages coupled to the drug sample fulfillment platform through which the prescriber can access the drug sample fulfillment platform to order drug samples;

3. a system for marketing pharmaceutical drugs, comprising a pharma rules sample engine for performing personalization and intelligent brand rule implementation, and a marketing sample engine for integrating with drug sample suppliers and Web portals for prescribers, where the pharma rules sample engine and the marketing sample engine are based on a set of brand rules and set of prescriber preferences;
4. a networked system for ordering pharmaceutical sample drugs, comprising the drug sample fulfillment platform that comprises the drug sample web site for mating with the web portal when the prescriber selects a hyperlink, where the drug sample web site presenting a web page including selectable options for the prescriber to order drug samples;
5. a method of selecting prescribers for a drug sample distribution, comprising dividing the prescribers into one or more segments based on pharma brand manager defined criteria, within the segment, associating products, allocation quantity, sample type that is selected from live samples, pre-printed or print on-demand, and drug strength from either within or between brands based on brand rules; and within the segment, associating timing considerations that are selected from sample offer time limit or rolling expiration dates for vouchers from either within or between brands based on brand rules;
6. a method of accessing the drug sample fulfillment platform, comprising:
    A. activating a link to access the drug sample fulfillment platform from the web portal;
    B. creating a transaction that includes a prescriber identifier and a partner identifier; and
    C. mating the drug sample web site to the web portal allowing the prescriber to navigate and order drug samples; and
7. a method of creating a stream of revenue from a drug sample distribution, comprising capturing a sample request on the drug sample fulfillment platform, and charging a pharmaceutical company a transaction request fee for the sample request for drug samples associated with a drug sponsored by the pharmaceutical company.

USE - For promoting, distributing and marketing pharmaceutical drugs (claimed).
ADVANTAGE - The inventive platform enhances drug sample fulfillment distribution. It can also serve as an avenue for consumers, e.g. patients, to learn about available drugs and request samples.
DESCRIPTION OF DRAWINGS - The figure is a block diagram of drug sample fulfillment architecture.

Title Terms /Index Terms/Additional Words: DRUG; SAMPLE; PLATFORM; DISTRIBUTE; PHARMACEUTICAL; COMPRISE; WEB; SITE; MATE; PORTAL; REQUEST; DATABASE; RECEIVE; THROUGH

Class Codes

International Patent Classification					
IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
G06Q-0030/00	A	I		R	20060101
G06Q-0030/00	C	I		R	20060101

ECLA: G06Q-030/00A
US Classification, Current Main: 705-014000
US Classification, Issued: 70514
File Segment: CPI; EPI
DWPI Class: B04; T01
Manual Codes (EPI/S-X): T01-J05B3; T01-J13A; T01-N03A2
Manual Codes (CPI/A-N): B11-C09

Dialog eLink: Order File History
9/5/2 (Item 2 from file: 350)

DIALOG(R)File 350: Derwent WPIX
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0014084304 *Drawing available*
WPI Acc no: 2004-267740/200425
Related WPI Acc No: 1998-584277; 1999-214234; 1999-609397; 2000-223381; 2000-365340; 2001-580032; 2002-425243; 2003-401260; 2003-635334; 2003-776213; 2005-354256; 2007-568788; 2007-784822
XRAM Acc no: C2004-104345
XRPX Acc No: N2004-211696

Interactive medication cassette for use with medication dispensing machine, comprises machine readable and writable information strip containing actual quantity information corresponding to actual quantity of medication

Patent Assignee: DE LA HUERGA C (DHUE-I)
Inventor: DE LA HUERGA C

Patent Family (2 patents, 1 countries)

Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
US 20040039481	A1	20040226	US 199633491	P	19961220	200425	B
			US 1997832613	A	19970328		
			US 1997955475	A	19971021		
			US 199896269	P	19980812		
			US 1998168783	A	19981008		
			US 2003649805	A	20030826		
US 7006894	B2	20060228	US 2003649805	A	20030826	200616	E

Priority Applications (no., kind, date): US 199633491 P 19961220; US 1997832613 A 19970328; US 1997955475 A 19971021; US 199896269 P 19980812; US 1998168783 A 19981008; US 2003649805 A 20030826

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes	
US 20040039481	A1	EN	39	31	Related to Provisional	US 199633491
					C-I-P of application	US 1997832613
					C-I-P of application	US 1997955475
					Related to Provisional	US 199896269
					Division of application	US 1998168783
					C-I-P of patent	US 5852590
					C-I-P of patent	US 6032155
					Division of patent	US 6611733

Alerting Abstract US A1
NOVELTY - An interactive medication cassette (10) for use with a medication dispensing machine that dispenses medication, comprises a machine readable and writable information strip (100) affixed to the cassette, and containing actual quantity information corresponding to the actual quantity of the medication held by the cassette, the information strip being in communication with the sensing mechanism to transmit the actual quantity information.
DESCRIPTION - An interactive medication cassette for use with a medication dispensing machine that dispenses medication, the dispensing machine having an associated computer processor (90) and a sensing mechanism, for obtaining and transmitting information to and from the associated computer processor, comprises a housing (15) adapted to hold an

actual quantity of the medication and to allow removal of the medication, the housing being removably secured to the dispensing machine; a machine readable and writable information strip affixed to the cassette, and containing actual quantity information corresponding to the actual quantity of the medication held by the cassette, the information strip being in communication with the sensing mechanism to transmit the actual quantity information to the associated computer processor. The dispensing machine alters the actual quantity of the medication in the cassette, when dispensing an amount of the medication, and the computer processor alters the information strip to indicate that the actual quantity of the medication in the cassette is altered.
An INDEPENDENT CLAIM is also included for a process of distributing medication and related information, comprising providing a dispensing machine and a medication cassette; joining the cassette with the dispensing machine, and aligning the information strip with the sensing mechanism to communicate information to and from the computer processor; dispensing a specified quantity of the medication from the dispensing machine to alter the actual quantity of the medication in the cassette; and altering the actual quantity information in the information strip, to indicate that the actual quantity of the medication is altered by the specified quantity of medication.
USE - The invention is for use with an interactive medication dispensing machine for dispensing medication and transmitting information. It is useful for a medication distribution and information/inventory system, for distributing a specific medication and coupling corresponding medication information to the specific medication during distribution. (all claimed)
ADVANTAGE - A reliable medication distribution and inventory system is achieved, while maintaining improved control over the access to the medication on the hospital floor. The invention keeps **track** of the type and **quantity** of **medication** doses it contains, during use on the hospital floors and in the dispensing machines; is not easily accessible during use; enables the dispensing machines and healthcare workers to easily tell, when a machine is running low or is out of a specific type of medication; provides flexibility of allowing healthcare workers to come to the pharmacy and pick up the cassettes they need at a convenient time; capable of communicating with the bulk containers in the hospital pharmacy; can be easily recalled by the pharmacy; and can keep track of the physician that prescribed the medication. Each dispensing machine is **linked** with the **pharmacy** database to enable the **pharmacy** staff to obtain a comprehensive inventory.
DESCRIPTION OF DRAWINGS - The figure is a perspective view of a medication container in the form of a rotating wheel cassette having a disk shaped portion.
10 Interactive medication cassette
15 Housing
32 Medication dispensing opening
90 Computer processor
100 Information strip

Title Terms /Index Terms/Additional Words: INTERACT; MEDICATE; CASSETTE; DISPENSE; MACHINE; COMPRISE; READ; WRITING; INFORMATION; STRIP; CONTAIN; ACTUAL; QUANTITY; CORRESPOND

Class Codes

International Patent Classification					
IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
A61J-0001/00	A	I		R	20060101
A61J-0007/00	A	I		R	20060101
A61J-0007/04	A	I		R	20060101
G06F-0019/00	A	I		R	20060101
G07F-0017/00	A	I	F	B	20060101
A61J-0001/00	C	I		R	20060101
A61J-0007/00	C	I		R	20060101
G06F-0019/00	C	I		R	20060101
G07F-0017/00	C	I	L	B	20060101

ECLA: A61J-001/00C10, A61J-007/00F1, A61J-007/04B3, G06F-019/00M3M
ICO: K61J-007:04B1B, K61J-007:04B1D2
US Classification, Current Main: 700-236000
US Classification, Issued: 700236, 700244, 700236, 700234, 700235
File Segment: CPI; EPI
DWPI Class: B07; S05; T01; T05; X25
Manual Codes (EPI/S-X): S05-G02G; S05-M01; T01-H01B3A; T01-J05A2B; T01-J05B4P; T01-J06A; T05-H06; T05-H08A; T05-H08C; X25-F03B
Manual Codes (CPI/A-N): B11-C03

Dialog eLink: Order File History
12/5/4 (Item 4 from file: 350)
DIALOG(R)File 350: Derwent WPIX
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0007387707
WPI Acc no: 1995-328414/199542
Related WPI Acc No: 1994-082043
XRAM Acc no: C1995-145717
XRPX Acc No: N1995-247156
Mobile semi-automated medication dispensing cart - has lockable drawers and compartments with access controlled and recorded by computer
Patent Assignee: PEARSON W G (PEAR-I)
Inventor: PEARSON W G

Patent Family (3 patents, 19 countries)

Patent Number	Kind	Date	Application Number	Kind	Date	Update	Type
WO 1995024699	A1	19950914	WO 1995US2639	A	19950303	199542	B
US 5490610	A	19960213	US 1994206877	A	19940307	199612	E
			US 1995421456	A	19950413		
US 5562232	A	19961008	US 1994206877	A	19940307	199646	E
			US 1995421456	A	19950413		
			US 1996598574	A	19960212		

Priority Applications (no., kind, date): US 1994206877 A 19940307; US 1995421456 A 19950413; US 1996598574 A 19960212

Patent Details

Patent Number	Kind	Lan	Pgs	Draw	Filing Notes	
WO 1995024699	A1	EN	17	3		
National Designated States,Original	CA JP					
Regional Designated States,Original	AT BE CH DE DK ES FR GB GR IE IT LU MC NL PT SE					
US 5490610	A	EN	8	3	Continuation of application	US 1994206877
US 5562232	A	EN	8	3	Continuation of application	US 1994206877
					Continuation of application	US 1995421456
					Continuation of patent	US 5490610

Alerting Abstract WO A1
A semi-automated medication dispenser comprises a cart (2) on wheels or castors (4) having an array of containers (8) for pills, and an array of drawers (10) for non-pill medications. A metal lid (16) is disposed between pill containers (8) and drawers (10) when the cart is in use, and may be pivoted upwards and locked to secure the containers (8). A computer (14) is loaded with patient information and physicians instructions, and when a patients password is entered, the computer only allows access to those compartments (8,10) appropriate for that patient. Simultaneously, the computer records the transaction. Pills and tablets are dispensed by way of a suction tube (12). The mobile cart is particularly suitable for dispensing multiple medications to multiple patients, such as in a hospital or nursing home, with minimal risk of administering incorrect dosages to the wrong patients, and with reduced risk of pilferage.
USE - The cart is useful for administering multiple doses of medication to a multiplicity of patients, each at the correct time.
ADVANTAGE - The cart provides a cost-efficient means of administering a variety of doses of medication to a variety of patients, in any sequence, at the correct time, with minimum risk of error.

Title Terms /Index Terms/Additional Words: MOBILE; SEMI; AUTOMATIC; MEDICATE; DISPENSE; CART; LOCK; DRAWER; COMPARTMENT; ACCESS; CONTROL; RECORD; COMPUTER

Class Codes

International Patent Classification					
IPC	**Class Level**	**Scope**	**Position**	**Status**	**Version Date**
A61G-0012/00	A	I		R	20060101
A61J-0007/00	A	I		R	20060101
A61J-0007/04	A	I		R	20060101
B65G-0001/137	A	I		R	20060101
G06F-0019/00	A	I		R	20060101
A61G-0012/00	C	I		R	20060101
A61J-0007/00	C	I		R	20060101
B65G-0001/137	C	I		R	20060101
G06F-0019/00	C	I		R	20060101

ECLA: A61G-012/00B, A61J-007/00F1, A61J-007/04B3, B65G-001/137D
ICO: K61J-007:04B1G, K61J-007:04B1H, K61J-007:04B2H4
US Classification, Issued: 2212, 221211, 2217, 221211
File Segment: CPI; EngPI
DWPI Class: B07; P56; Q35
Manual Codes (CPI/A-N): B11-C03

Dialog eLink: Order File History
12/5/5 (Item 1 from file: 347)
DIALOG(R)File 347: JAPIO
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04746973 **Image available**
MEDICINE PREPARING AND MANAGING SYSTEM

Pub. No.: 07-039573 [JP 7039573 A]
Published: February 10, 1995 (19950210)
Inventor: ARIMORI FUKUO
Applicant: NIPPON AVIONICS CO LTD [327329] (A Japanese Company or Corporation), JP (Japan)
Application No.: 05-203712 [JP 93203712]
Filed: July 27, 1993 (19930727)
International Class: [6] A61J-003/00; **G06F-017/60**
JAPIO Class: 14.4 (ORGANIC CHEMISTRY -- Medicine); 28.2 (SANITATION -- Medical); 45.4 (INFORMATION PROCESSING -- Computer Applications)

ABSTRACT

PURPOSE: To provide a system for the easy preparation and management of supplying medicine in accordance with prescription by medical doctor.

CONSTITUTION: In the case of preparation of medicine ID (identity) tag 21 is read by a read unit 8 of the prescription and information for prescription is delivered from a data processor 7. Data of medicine are read by a read unit 11 for medicine data from ID tag 23 of a container 22, and the dosimetry is carried out by a weighing unit 13. The fitness of the dose for the prescription is judged by a data processor 7, and a warning message is delivered from an audio output unit 12 when disagreement between the two is recognized. After the preparation of medicine, the residual quantities of medicine are estimated and the record in a filing unit 9 for medicine data is renewed. In the case of managing medicine, information concerning the quantity of medicine is output out of a data processor 7 to calculate the current **remained** amount of **medicine** according to the replenished **amount** of the **medicine** and the **record** in a filing unit 9 is renewed.

B. Patent Files, Full-Text

```
File 348:EUROPEAN PATENTS 1978-200922
         (c) 2009 European Patent Office
File 349:PCT FULLTEXT 1979-2009/UB=20090528|UT=20090521
         (c) 2009 WIPO/Thomson


Set     Items   Description
S1      94076   (AMOUNT OR NUMBER OR QUANTITY OR TOTAL OR HOW()(MANY OR MUCH)) (5N)
 (MEDICATION? ? OR MEDICIN?? OR MEDICAMENT? ? OR DRUG? ? OR PILL? ? OR TABLET? ? OR
BOLUS OR MED OR MEDS OR CAPSULE? ? OR VITAMIN? ? OR SUPPLEMENT? ? OR PHARMACEUTICAL
OR PRESCRIPTION? ?)
S2       4538   S1 (10N) (MONITOR??? OR COUNT??? OR RECORD??? OR CAPTUR??? OR
TRACK??? OR DOCUMENT??? OR LOG OR LOGS OR EXTRACT???)
S3      13528   S1 (10N) ((GIV??? OR BRING??? OR BROUGHT OR TAK??? OR TOOK OR
 SEND???)(2W)BACK OR RETURN?? OR LEFT OR REMAIN??? OR CONSUMED OR USED OR TAKEN)
EN)
S4        746   S1 (10N) ("NOT" OR WASN()T OR DIDN()T)(3N)(USED OR CONSUMED OR
TAKEN OR FINISHED OR UTILI?ED)
S5       1359   (PHARMACY OR PHARMACIES OR DRUGSTORE? ? OR DRUG()(STORE? ? OR
CHAIN? ? OR OUTLET? ?) OR APATHECAR??? OR PHARMACIST? ? OR CHEMIST? ? OR
DISPENSAR???) (10N) (CONNECT??? OR LINK??? OR SHAR??? OR INTERCONNECT??? OR
INTERLINK??? OR NETWORK??? OR INTERNET OR INTRANET OR FAX??? OR FACSIMILE??? OR
ELECTRONIC? OR ONLINE OR ON()LINE OR WEBSITE? ? OR WEBPAGE? ? OR HOMEPAGE? ? OR WEB
OR SITE? ? OR PLATFORM? ? OR PORTAL? ? OR REALTIME OR REAL()TIME OR INTERACTIVE OR
DYNAMIC)
S6         12   AU=(KALIES, R? OR KALIES R? OR KALIES (1N) (R OR RALPH))
S7     244262   IC=(G06F OR G06Q)
```

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S8       4538   S1 () S2
S9        582   S8()(S3 OR S4)
S10         4   S9 (S) S5
S11         0   S10 AND S7
S12        59   S9 AND S7
S13        19   S12 NOT AY>2002
S14         1   S6 AND S9
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Dialog eLink: Order File History
13/3K/6 (Item 6 from file: 348)
DIALOG(R)File 348: EUROPEAN PATENTS
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00743340

DEVICE FOR TRANSCRIBING AND RECORDING THE DOSAGE INSTRUCTIONS OF A PRESCRIPTION DRUG
EINRICHTUNG ZUM VERSCHREIBEN UND AUFZEICHNEN VON DOSIERUNGSANLEITUNGEN FUR ARZNEIMITTEL
DISPOSITIF DE TRANSCRIPTION ET D'ENREGISTREMENT DE LA POSOLOGIE D'UN MEDICAMENT PRESCRIT

Patent Assignee:

- **MANUFACTURE D'APPAREILLAGE ELECTRIQUE DE CAHORS**; (445941)
  B.P.149 Regourd; F-46003 Cahors Cedex; (FR)
  (applicant designated states: BE;DE;ES;IT;LU)
- **Vie, Philippe**; (2066530)
  Batiment B, 47, rue Raymond-IV; 31000 Toulouse; (FR)
  (applicant designated states: BE;DE;ES;IT;LU)
- **Peyre, Alain**; (2066540)
  58, chemin Basso-Cambo; 31000 Toulouse; (FR)
  (applicant designated states: BE;DE;ES;IT;LU)

Inventor:

- **VIE, Philippe**
  Batiment B 47, rue Raymond-IV; F-31000 Toulouse; (FR)
- **PEYRE, Alain**
  58, chemin Basso-Cambo; F-31000 Toulouse; (FR)

Legal Representative:

- **Derambure, Christian (15169)**
  Bouju Derambure Bugnion, 52, rue de Monceau; 75008 Paris; (FR)

	Country	Number	Kind	Date

	Country	Number	Kind	Date	
Patent	EP	760142	A1	19970305	(Basic)
	EP	760142	B1	19990804	
	WO	9531790		19951123	
Application	EP	95920936		19950511	
	WO	95FR621		19950511	
Priorities	FR	945812		19940511	

Designated States:
BE; DE; ES; IT; LU;

International Patent Class (V7): <B>G06F-019/00; ; G06F-159/00</B>; <B>G06F-019/00</B>... ...<B>G06F-159/00</B>
NOTE: No A-document published by EPO

Legal Status Type	Pub. Date	Kind	Text

Language	Publication:	French
Procedural:		French
Application:		French

Fulltext Availability Available Text	Language	Update	Word Count
CLAIMS B	(English)	9931	651
CLAIMS B	(German)	9931	565
CLAIMS B	(French)	9931	648
SPEC B	(French)	9931	2594
Total Word Count (Document A) 0			
Total Word Count (Document B) 4458			
Total Word Count (All Documents) 4458			

Claims: ...and recording the galenic form of the medicine, means (3) of transcribing and recording the frequency of taking the medicine, means (4) of transcribing and **recording** the **quantity** in which the **medicine** is to be taken, means (7) of transcribing and **recording** the duration of treatment by the medicine, means (9) of processing the items of information and/or the directions for use transcribed and recorded, means...

Dialog eLink: Order File History
13/3K/8 (Item 2 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00961287

PATIENT COMPLIANCE AND MONITORING SYSTEM
SYSTEME DE SURVEILLANCE DE L'OBSERVANCE D'UN TRAITEMENT

Patent Applicant/Patent Assignee:

- **ENDEAVOR PHARMACEUTICALS INCORPORATED**; 127 Racine Drive, Suite 202, Wilmington, NC 28403
  US; US(Residence); US(Nationality)
  (For all designated states except: US)
- **WALDON R Forrest**; 6310 Sea Mist Court, Wilmington, NC 28409
  US; US(Residence); US(Nationality)
  (Designated only for: US)
- **LEONARD Thomas W**; 2201 South Live Oak Parkway, Wilmington, NC 28403
  US; US(Residence); US(Nationality)
  (Designated only for: US)

Patent Applicant/Inventor:

- **WALDON R Forrest**
  6310 Sea Mist Court, Wilmington, NC 28409; US; US(Residence); US(Nationality); (Designated only for: US)
- **LEONARD Thomas W**
  2201 South Live Oak Parkway, Wilmington, NC 28403; US; US(Residence); US(Nationality); (Designated only for: US)

Legal Representative:

- **BAUM Allen R(et al)(agent)**
  Burns, Doane, Swecker & Mathis, L.L.P., P.O. Box 1404, Alexandria, VA 22313-1404; US;

	Country	**Number**	**Kind**	**Date**
Patent	WO	200295352	A2-A3	20021128
Application	WO	2002US15117		20020515
Priorities	US	2001861005		20010518

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE; TR;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GQ; GW;
ML; MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; MZ; SD; SL; SZ; TZ;
UG; ZM; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-017/60</B>	Main

Language Publication Language: English
Filing Language: English
Fulltext word count: 11656

Claims:

...information based on the assessment to the appropriate individuals. Such an output device may be an electronic communication device for delivery of email, a printer **attached** to the primary computer and the like. Any such output device known to those of skill in the art may be used. The information that...to confirm dosing, the number of tablets taken per day, the time at which the tablets are taken, and the like. The information system may **used** to **track** the dosing and/or **number** of **tablets** received in the **prescription**, and determine when a refill may be necessary. The information system may be used to send a reminder, by email, mail, automated...example, as shown in Figure 3, if the average frequency per day of a hot Rash is less than 3 and the average severity is **mild**, the number 1 may be assigned. If the average frequency is 3-8 and the average severity is moderate, the number 4 may be assigned ...hot flash the subject has a sensation of heat with perspiration, but has no discontinuation of activity. A severe hot Rash is described as a **sensation** of heat with sweating which results in a discontinuation of activity. Discontinuation of activity can be very brief, such as stopping to briefly fan or...

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13/3K/9 (Item 3 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00924733

SYSTEM AND METHOD FOR PROVIDING MEDICATION MANAGEMENT
SYSTEME ET PROCEDE DE GESTION DE LA MEDICATION

Patent Applicant/Patent Assignee:

- **CYBERCARE TECHNOLOGIES INC**; Suite 100, 2500 Quantum Lake Blvd., Boynton Beach, FL 33426 US; US(Residence); US(Nationality)

Legal Representative:

- **HORSTEMEYER Scott A(agent)**
  Thomas, Kayden, Horstemeyer & Risley, LLP, Suite 1750, 100 Galleria Parkway, NW, Atlanta, GA 30339-5948; US;

	Country	Number	Kind	Date
Patent	WO	200257870	A2-A3	20020725

	Country	Number	Kind	Date
Application	WO	2001US47968		20011211
Priorities	US	2001766525		20010119

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE; TR;

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-017/60</B>	Main

Language Publication Language:	English
Filing Language:	English
Fulltext word count:	7256

Claims:

...use of said point value provides said medication compliance level.

8 The system of claim 1, wherein said managing said patient's medication usage includes monitoring said **medication usage** and requesting replacement of said **medication** based upon a **remaining amount** of said **medication** and a predefined level.
9 The system of claim 8, wherein said requesting replacement of said medication is performed via said transceiver. I 10. A...
...said medication compliance level.
15 The method of claim 10, wherein said step of managing said patient's medication usage further comprises the step of **monitoring** said medication usage, and requesting replacement of said **medication** when a remaining **amount** of said **medication** has gone below a predefined level.
16 The method of claim IO, wherein said step of deten-nining a medication compliance level is performed by

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13/3K/10 (Item 4 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00922981

PATIENT SCHEDULING TECHNIQUES FOR AN IMPLANTABLE MEDICAL DEVICE
TECHNIQUES D'ETABLISSEMENT DE CALENDRIER D'UN PATIENT CONCERNANT UN DISPOSITIF MEDICAL IMPLANTABLE

Patent Applicant/Patent Assignee:

- **MEDTRONIC INC**; 710 Medtronic Parkway N.E., Minneapolis, MN 55432
  US; US(Residence); US(Nationality)

Legal Representative:

- **WALDKOETTER Eric R(et al)(agent)**
  Medtronic, Inc. LC340, 710 Medtronic Parkway Northeast, Minneapolis, MN 55432; US;

	Country	Number	Kind	Date
Patent	WO	200256235	A2-A3	20020718
Application	WO	2001US49292		20011220
Priorities	US	2000259022		20001229

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE; TR;

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-019/00</B>	Main

Language Publication Language:	English
Filing Language:	English
Fulltext word count:	7869

Detailed Description:

...storing the various software modules for use with the present invention, a drug monitor module 735, and (optionally) a drug scheduling module 115. The drug **monitor** module 735 provides one or more **drug** usage parameters that determine the **amount** of **drug** remaining in the implantable device 105. Drug usage parameters **monitored** by the drug monitor module 7 3 5 may include, for example and without limitation, the quantity drug consumed by the patient, the rate in

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13/3K/11 (Item 5 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00921107

SYSTEM AND METHOD FOR AUTOMATED ANIMAL MEDICINE INVENTORY CONTROL
SYSTEME ET PROCEDE DE CONTROLE AUTOMATISE DE STOCKS DE MEDICAMENTS POUR ANIMAUX

Patent Applicant/Inventor:

- **HOGAN Thomas**
  2420 Westport Circle, Marietta, GA 30064; US; US(Residence); US(Nationality);

Legal Representative:

- **LAFFERTY Wm Brook(agent)**
  Troutman Sanders LLP, 600 Peachtree Street, N.E., Atlanta, GA 30308; US;

	Country	Number	Kind	Date
Patent	WO	200254177	A2-A3	20020711
Application	WO	2001US49647		20011227
Priorities	US	2001752989		20010102

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE; TR;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GQ; GW;
ML; MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; MZ; SD; SL; SZ; TZ;
UG; ZM; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-017/60</B>	Main

Language Publication Language:	English
Filing Language:	English
Fulltext word count:	4962

Detailed Description:

...missing or delaying an important regimen.

Accordingly, there is a need for a system for animal medicine accountability whereby amounts of animal medicine **used** are automatically subtracted from a previously **recorded amount** of stockpiled **medicine**, resulting in a real-time, accurate indication of how much of any particular medicine in on-hand in a local stockpile.

There is a further ...for purposes such as those identified herein. In any event, after the medicine is identified to PC 25, the cattleman continues to prepare to **deliver injections to the animal 40 in accordance with the inventive concepts of the present invention. Further preparation for an injection session includes preparation of**

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13/3K/12 (Item 6 from file: 349)

DIALOG(R)File 349: PCT FULLTEXT
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00889293

SYSTEM FOR MEDICATION DISPENSING AND INTEGRATED DATA MANAGEMENT
SYSTEME DE DELIVRANCE DE MEDICAMENTS ET DE GESTION DE DONNEES INTEGREE

Patent Applicant/Patent Assignee:

- **MEDVANTX INC**; Suite 100, 9171 Towne Center Drive, San Diego, CA 92122
  US; US(Residence); US(Nationality)

Legal Representative:

- **ARNO Thomas R(agent)**
  Knobbe, Martens, Olson & Bear, LLP, 16th Floor, 620 Newport Center Drive, Newport Beach, CA 92660; US;

	Country	Number	Kind	Date
Patent	WO	200223459	A2-A3	20020321
Application	WO	2001US25585		20010815
Priorities	US	2000232643		20000914

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

[EP] AT; BE; CH; CY; DE; DK; ES; FI; FR; GB;
GR; IE; IT; LU; MC; NL; PT; SE; TR;

[OA] BF; BJ; CF; CG; CI; CM; GA; GN; GQ; GW;
ML; MR; NE; SN; TD; TG;

[AP] GH; GM; KE; LS; MW; MZ; SD; SL; SZ; TZ;
UG; ZW;

[EA] AM; AZ; BY; KG; KZ; MD; RU; TJ; TM;

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-019/00</B>	Main

Language Publication Language: English
Filing Language: English
Fulltext word count: 28454

Detailed Description:

...either an office visit or medication cost.

As used herein, "counseling consent' refers to a means by which a patient waives required clinical counseling that **is provided at the time the medication is dispensed. Patients must sign a waiver if they decline counseling for their new prescription(s).**

As used herein...such dispensing and post-dispensing can be implemented in a variety of forms on any appropriate system or subsystem.

As with dispensing prescriptions, accidental dispense **monitoring** and **medication** return processes, there are a **number** of other tasks that are common to each of the medication and product dispensing subsystems. FIGS. 1 1-1 8 provide illustrative examples of some...and Cosmeceutical Subsystem
The OTC medication subsystem and cosmecoutical subsystem can assist the physician office staff with inventory, management and financial reporting as related to **the dispensing of non-prescription drugs. This subsystem**

Dialog eLink: Order File History
13/3K/16 (Item 10 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00504236

SYSTEM AND METHOD FOR MANAGING ADMINISTRATION OF MEDICINE
SYSTEME ET TECHNIQUE DE GESTION POUR L'ADMINISTRATION DE MEDICAMENTS

Patent Applicant/Patent Assignee:

- **SANGSTAT MEDICAL CORPORATION**;
  ; ;
- **POULETTY Philippe**;
  ; ;
- **HAMILTON Richard G**;
  ; ;
- **ROSSI Stephen J**;
  ; ;
- **McENROE Debra L**;
  ; ;

	Country	Number	Kind	Date
Patent	WO	9935588	A1	19990715
Application	WO	98US22830		19981029
Priorities	US	9871107		19980112
	US	98143483		19980828

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-015/42</B>	Main

Language Publication Language: English

Filing Language:

Fulltext word count: 49659

Detailed Description:

...medicine.

Moreover, special challenges are presented in managing patients who are taking more than one medication. Elderly patients on multiple medications may have difficulty keeping **track** of whether they have taken all their **medications**, when, and in what **quantity**. In the clinical setting, proper administration of multiple medications to acutely ill patients is challenging for care providers.

Thus there is a need to track...

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13/3K/17 (Item 11 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00366171

SPREADSHEETS AND CHARTS SYSTEM SPECIALIZED FOR MEDICAL USE
SYSTEME TABLEAUX ET DE GRAPHIQUES UTILISE SPECIALEMENT DANS LE DOMAINE MEDICAL

Patent Applicant/Patent Assignee:

- **KUMAGAI Yasuo**;
  ; ;

	Country	Number	Kind	Date
Patent	WO	9706498	A1	19970220
Application	WO	96JP2177		19960802
Priorities	US	95510665		19950803

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-019/00</B>	Main
<B>G06F-17:60</B>	

Language Publication Language: English

Filing Language:

Fulltext word count: 8329

Detailed Description:

...illustrate the method used to calculate and decide the
current column position;
FIGS. 8a and 8b are graphs illustrating how repeated averaging
recalculations obtain linear **interpolation**. When the interval between observed data is around 14 units, more than one hundred recalculations are needed (FIG.

8a). When it is around 30 units ...s blood sugar (BS) level patient's glucosihated hemoglobin level, the patient's urine volume(UV), the patient's intake of calories (Diet), and the **amount** of a **drug** taken by the patient (Daonil) are **recorded** for particular hospital days (HSP).

The data shown in FIG. 3a represents actual observed data or administered treatments and is called "real data". Each column...

Dialog eLink: Order File History
13/3K/18 (Item 12 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00302048

ELECTRONIC HEALTH CARE COMPLIANCE ASSISTANCE SYSTEM
SYSTEME D'ASSISTANCE ELECTRONIQUE AIDANT UN PATIENT A SE CONFORMER A DES SOINS PRESCRITS

Patent Applicant/Patent Assignee:

- **INNOVATIVE ENTERPRISES INTERNATIONAL CORPORATION**;
  ; ;

	Country	Number	Kind	Date
Patent	WO	9520199	A1	19950727
Application	WO	95US807		19950123
Priorities	US	94184369		19940121

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-019/00</B>	Main

Language Publication Language: English

Filing Language:

Fulltext word count: 19233

Detailed Description:

...200,891, typically require the user to program the device by using a variety of switches and buttons. The small buttons are difficult for elderly **persons** to operate, and it is both complex and intimidating for many patients, especially
the elderly, to remember the sequence of operations and meaning of the...i.e., J=1 for
first segment) J* Message segment appended to reminder segment when user plays message but forgets to confirm an action
R **Counts** number of repeats for a segment D Index for **number** of doses remaining in a **prescription**
Message Parameters ST Start time. The time that the first dosage should be taken RT Reminder times for a typical day
SD Start Date. The...

Dialog eLink: Order File History
13/3K/19 (Item 13 from file: 349)
DIALOG(R)File 349: PCT FULLTEXT
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00187966

INTERACTIVE MEDICATION DELIVERY SYSTEM
SYSTEME DE DISTRIBUTION DE MEDICAMENTS INTERACTIFS

Patent Applicant/Patent Assignee:

- **HEALTHTECH SERVICES CORP**;
  ; ;

	Country	Number	Kind	Date
Patent	WO	9105310	A1	19910418
Application	WO	90US5602		19900928
Priorities	US	89172		19890929

Designated States: (All protection types applied unless otherwise stated - for applications 2004+)

Main International Patent Classes (Version 7):

IPC	Level
<B>G06F-015/42</B>	Main

Language Publication Language: English

Filing Language:

Fulltext word count: 12020

Detailed Description:

...R3) 112
that reflects the date and time the system 20 refused to administer medication.

Each medication file 104 and 106 also includes a fourth **record** (R4) 114 that contains a number that represents the **amount** of the **medication** presently **remaining** within the associated storage compartment 40/42.

Each medication file 104 and 106 can include a number of additional records depending upon the level of...

IV. Text Search Results from Dialog

A. NPL Files, Abstract

```
File   5:Biosis Previews(R) 1926-2009/May W5
         (c) 2009 The Thomson Corporation
File  73:EMBASE 1974-2009/Jun 02
         (c) 2009 Elsevier B.V.
File 155:MEDLINE(R) 1950-2009/Jun 02
         (c) format only 2009 Dialog
File  34:SciSearch(R) Cited Ref Sci 1990-2009/May W4
         (c) 2009 The Thomson Corp
File 434:SciSearch(R) Cited Ref Sci 1974-1989/Dec
         (c) 2006 The Thomson Corp
File  42:Pharm. News Index 1974-2009/May W2
         (c) 2009 ProQuest Info&Learning
File  74:Int.Pharm.Abs 1970-2009/Mar B2
         (c) 2009 The Thomson Corporation
File  35:Dissertation Abs Online 1861-2009/May
         (c) 2009 ProQuest Info&Learning
File 474:New York Times Abs 1969-2009/Jun 04
         (c) 2009 The New York Times
File 475:Wall Street Journal Abs 1973-2009/Jun 04
         (c) 2009 The New York Times
File 583:Gale Group Globalbase(TM) 1986-2002/Dec 13
         (c) 2002 Gale/Cengage
File  65:Inside Conferences 1993-2009/Jun 03
         (c) 2009 BLDSC all rts. reserv.
File  99:Wilson Appl. Sci & Tech Abs 1983-2009/May
         (c) 2009 The HW Wilson Co.
File   2:INSPEC 1898-2009/May W4
         (c) 2009 The IET
File 256:TecInfoSource 82-2009/Mar
         (c) 2009 Info.Sources Inc


Set      Items   Description
S1     140196   (AMOUNT OR NUMBER OR QUANTITY OR TOTAL OR HOW()(MANY OR MUCH)) (5N)
(MEDICATION? ? OR MEDICIN?? OR MEDICAMENT? ? OR DRUG? ? OR PILL? ? OR TABLET? ? OR
BOLUS  OR MED OR MEDS OR CAPSULE? ? OR VITAMIN? ? OR SUPPLEMENT? ? OR
PHARMACEUTICAL OR PRESCRIPTION? ?)
S2       6263   S1 (10N) (MONITOR??? OR COUNT??? OR RECORD??? OR CAPTUR??? OR
TRACK??? OR DOCUMENT??? OR LOG OR LOGS OR EXTRACT???)
S3      10747   S1 (5N) ((GIV??? OR BRING??? OR BROUGHT OR TAK??? OR TOOK OR
SEND???)(2W)BACK OR RETURN?? OR LEFT OR REMAIN??? OR CONSUMED OR USED OR TAKEN)
KEN)
S4        685   S1 (5N) ("NOT" OR WASN()T OR DIDN()T)(3N)(USED OR CONSUMED OR TAKEN
OR FINISHED OR UTILI?ED)
S5        101   S3 (5N) (PHARMACY OR PHARMACIES OR DRUGSTORE? ? OR DRUG()(STORE? ?
OR CHAIN? ? OR OUTLET? ?) OR APATHECAR??? OR PHARMACIST? ? OR CHEMIST? ? OR
DISPENSAR???)
S6      13444   (PHARMACY OR PHARMACIES OR DRUGSTORE? ? OR DRUG()(STORE? ? OR
CHAIN? ? OR OUTLET? ?) OR APATHECAR??? OR PHARMACIST? ? OR CHEMIST? ? OR
```

```
DISPENSAR???) (10N) (CONNECT??? OR LINK??? OR SHAR??? OR INTERCONNECT??? OR
INTERLINK??? OR NETWORK??? OR INTERNET OR INTRANET OR FAX??? OR FACSIMILE??? OR
ELECTRONIC? OR ONLINE OR ON()LINE OR WEBSITE? ? OR WEBPAGE? ? OR HOMEPAGE? ? OR WEB
OR SITE? ? OR PLATFORM? ? OR PORTAL? ? OR REALTIME OR REAL()TIME OR INTERACTIVE OR
DYNAMIC)
S7         13   AU=(KALIES, R? OR KALIES R? OR KALIES (1N) (R OR RALPH))
S8        787   S2 AND (S3 OR S4)
S9         31   S8 AND S5
S10         0   S9 AND S6
S11        25   S9 NOT PY>2002
S12        11   RD  (unique items)
S13         5   S8 AND S6
S14         5   S13 NOT S12
S15         0   S14 NOT PY>2002
S16         0   RD  (unique items)
S17       708   S1 AND S6
S18        61   S17 AND S2
S19         5   S18 AND (S3 OR S4 OR S5)
S20         0   S19 NOT PY>2002
S21        25   S17 AND (S3 OR S4)
S22         4   S21 NOT PY>2002
S23         4   RD  (unique items)
S24         4   S23 NOT S12
S25     10747   S1 AND S3
S26       101   S25 AND S5
S27         9   S26 AND S6
S28         0   S7 AND S1
S29         0   S7 AND S6
```

Dialog eLink: USPTO Full Text Retrieval Options
12/5/1 (Item 1 from file: 5)
DIALOG(R)File 5: Biosis Previews(R)
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16404382 **Biosis No.:** 200100576221
Unused drugs returned to the pharmacy: New data

Author: Bronder E (Reprint); Klimpel A
Author Address: Institut fuer Pharmakoepidemiologie und Technologiebewertung IPTA GmbH, Invalidenstrasse 115, D-10115, Berlin, Germany**Germany
Journal: International Journal of Clinical Pharmacology and Therapeutics 39 (11): p 480-483 November, 2001 2001
Medium: print
ISSN: 0946-1965
Document Type: Article
Record Type: Abstract
Language: English

Abstract: Introduction: Although the increasing costs in the health system in Germany is a frequently discussed topic, the **amount** of the so-called unused **drugs** which patients and customers **bring back** to **pharmacies** does not seem to diminish. In 1988, the authors conducted a study to document this problem. Ten years later, in 1998, a second study with the same design was done. The new data are compared with the results of the first study. Methods: The study was carried out in a public pharmacy in Berlin, Germany, 1998. All drugs returned unused were documented during a period of 12 months. The drugs were **counted** and classified according to therapeutic groups and to **prescription** or OTC status. The **remaining amount** in each package was determined in relation to the package size. The prices of the drugs were obtained from the

"Rote Liste 1997". Results: 10,603 unused drug-packages were collected (1988: n=5,164). The 10 most frequent indication groups showed nearly the same ranking as the German annual report of prescribed drugs (GKV-Index 1988, same result). Only 17% of the returned drugs were for self-medication (1988: 12%). The value of the original medicines amounted to approximately DM 232,920 (1988: DM 100,000), therefore, the average drug price was DM 22 (1988: DM 19). On an average, packages contained 65% (1988: 70%). 24% of the drug packages returned contained the original content, i.e. were unused (1988: 31%). 39% of the returned packages contained 51-99% of the original contents (1988: 35%) and 37% contained up to 50% of the original contents (1988: 34%). Conclusions: Although patients in Germany had to pay a higher prescription charge in 1998 than in 1988, the amount of unused drugs has increased. The reasons for this non-compliant behavior have not yet been analyzed. The results of this study suggest the need for further research for the reasons of non-compliance.

DESCRIPTORS:
Major Concepts: Behavior; Pharmacology; Pharmacy--Allied Medical Sciences
Biosystematic Names: Hominidae--Primates, Mammalia, Vertebrata, Chordata, Animalia
Organisms: human (Hominidae)--patient
Common Taxonomic Terms: Animals; Chordates; Humans; Mammals; Primates; Vertebrates
Geographical Name: Berlin (Europe; Palearctic region, Germany; Europe; Palearctic region)
Miscellaneous Terms: Concept Codes: non-compliant behavior; unused drug return
Concept Codes:
07002 Behavioral biology - General and comparative behavior
07004 Behavioral biology - Human behavior
12512 Pathology - Therapy
22002 Pharmacology - General
22005 Pharmacology - Clinical pharmacology
Biosystematic Codes:
86215 Hominidae

Dialog eLink: USPTO Full Text Retrieval Options
12/5/2 (Item 2 from file: 5)
DIALOG(R)File 5: Biosis Previews(R)
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13597317 **Biosis No.:** 199699231377
Polypharmacy among nursing home geriatric medicaid recipients

Author: Gupta Sanjay (Reprint); Rappaport Harvey M; Bennett Lonnie T
Author Address: Roche Lab., 340 Kingsland St., Nutley, NJ 07110, USA**USA
Journal: Annals of Pharmacotherapy 30 (9): p 946-950 1996 1996
ISSN: 1060-0280
Document Type: Article
Record Type: Abstract
Language: English

Abstract: OBJECTIVE: To determine the factors that influence the number of different drugs prescribed to geriatric Medicaid recipients residing in Louisiana's intermediate care facilities I (ICFs I). DESIGN: Observational and cross-sectional with descriptive and analytic components. PARTICIPANTS:All geriatric Medicaid recipients in Louisiana ICFs I during 1994 (n = 19 932). METHODS:Relevant data on sex, age, race, geographic region of a recipient, number of prescribing physicians, number of **pharmacies used**, and the **number** of **drugs** prescribed to a recipient were **extracted** from the state Medicaid files. Frequencies for the seven study variables were calculated. Regression analysis was used to evaluate the influence of the six predictor variables on the number of drugs prescribed. RESULTS:The study population was 73.63% women, 60.07% 81 years of age and older, 70.65% white, 23.21% African-American, 6.14% other races, and 29.83% from predominantly rural north Louisiana. A total of 44.60% of the residents received prescriptions from one physician, 8.41% of the residents were single pharmacy users, and 45.65% were prescribed more than 10 drugs during the year. The regression model accounted for 20.53% of the total variation in the number of drugs prescribed to a recipient. Race, geographic region, number of prescribing physicians, and number of **pharmacies used** by a recipient influenced the **number** of **drugs** prescribed. CONCLUSIONS: To reduce the **number** of **drugs** prescribed and polypharmacy among geriatric Medicaid recipients, Louisiana's ICFs I should minimize the number of physicians and pharmacies used in this population.

DESCRIPTORS:
Major Concepts: Geriatrics--Human Medicine, Medical Sciences; Pharmacology; Public Health-- Allied Medical Sciences
Biosystematic Names: Hominidae--Primates, Mammalia, Vertebrata, Chordata, Animalia
Organisms: human (Hominidae)
Common Taxonomic Terms: Animals; Chordates; Humans; Mammals; Primates; Vertebrates
Geographical Name: North America (Nearctic region); USA (North America) (Nearctic region)
Miscellaneous Terms: Concept Codes: AGED; AGED/80 AND OVER; GERIATRICS; MEDICAID; NURSING HOME; PATIENT; PHARMACOLOGY; POLYPHARMACY; STATISTICS
Concept Codes:
22002 Pharmacology - General
22005 Pharmacology - Clinical pharmacology
24500 Gerontology
37010 Public health - Public health administration and statistics
Biosystematic Codes:
86215 Hominidae

Dialog eLink: USPTO Full Text Retrieval Options
12/5/3 (Item 1 from file: 73)
DIALOG(R)File 73: EMBASE
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0078519995 **EMBASE No:** 2001126101
Impact of a pharmacist on drug costs in a coronary care unit

Gandhi P.J.; Smith B.S.; Tataronis G.R.; Maas B.
MA College of Pharm./Health Sciences, 179 Longwood Avenue, Boston, MA 02115 , United States
Corresp. Author/Affil: Gandhi P.J.: MA College of Pharm./Health Sciences, 179 Longwood Avenue, Boston, MA 02115, United States
Corresp. Author Email: gandhip@ummhc.org

American Journal of Health-System Pharmacy (Am. J. Health-Syst. Pharm.) (United States) March 15, 2001 , 58/6 (497-503)
CODEN: AHSPE **ISSN:** 1079-2082
Document Type: Journal ; Article **Record Type:** Abstract
Language: English **Summary language:** English
Number of References: 17

The impact of clinical pharmacy services on direct drug costs in a coronary care unit (CCU) was studied. An observational, nonrandomized study was conducted on all patients admitted to the CCU to evaluate the impact of clinical pharmacy services on direct drug costs. Clinical pharmacy services were introduced into the CCU in July 1998. Patient characteristics, mean drug costs per admission, mean drug category costs per admission, and total hospital costs per admission were determined for October 1997 to June 1998 (nonintervention period), July 1998 to March 1999 (intervention period 1), and April 1999 to December 1999 (intervention period 2). The Clini-Trend program was **used** to estimate the **total** reduction in **drug** costs associated with **documented pharmacist** interventions from January to December 1999. Mean patient age, sex, admitting diagnosis-related group, Medicare case-mix index, ventilator days, length of stay, and number of deaths did not differ significantly among the three study periods. Mean S.D. drug costs per admission for the nonintervention period were $374.05 $75.51. With the introduction of clinical pharmacy services, mean S.D. drug costs per admission were $381.94 $66.16 (p > 0.1 for intervention period 1 compared with the nonintervention period) and $233.74 $84.16 (p = 0.002 for intervention period 2 compared with the nonintervention period). From January to December 1999, 4151 pharmacist interventions were documented. The estimated reduction in drug costs associated with the interventions totaled $372,384. A pharmacist's clinical

services in the CCU allowed for significant estimated reductions in total drug costs.

Drug Descriptors:
antacid agent--drug therapy--dt; antacid agent--pharmacoeconomics--pe; antiarrhythmic agent--drug therapy--dt; antiarrhythmic agent --pharmacoeconomics--pe; antibiotic agent--drug therapy--dt; antibiotic agent--pharmacoeconomics--pe; antihypertensive agent--drug therapy--dt; antihypertensive agent--pharmacoeconomics--pe; antithrombocytic agent--drug therapy--dt; antithrombocytic agent--pharmacoeconomics--pe; benzodiazepine derivative--drug therapy--dt; benzodiazepine derivative--pharmacoeconomics --pe; fibrinogen receptor antagonist--drug therapy--dt; fibrinogen receptor antagonist--pharmacoeconomics--pe; histamine H3 receptor antagonist--drug therapy--dt; histamine H3 receptor antagonist--pharmacoeconomics--pe; narcotic agent--drug therapy--dt; narcotic agent--pharmacoeconomics--pe; proton pump inhibitor--drug therapy--dt; proton pump inhibitor --pharmacoeconomics--pe; sucralfate--drug therapy--dt; sucralfate --pharmacoeconomics--pe
Medical Descriptors:
* bacterial infection--disease management--dm; *bacterial infection--drug therapy--dt; *ischemic heart disease--disease management--dm; *ischemic heart disease--drug therapy--dt
adult; aged; article; controlled study; cost control; female; hospital pharmacy; human; intensive care unit; length of stay; major clinical study; male; pharmacist; priority journal
CAS Registry Number: 54182-58-0 (sucralfate)
SECTION HEADINGS:
Public Health, Social Medicine and Epidemiology
Cardiovascular Diseases and Cardiovascular Surgery
Health Policy, Economics and Management
Drug Literature Index
Pharmacy

Dialog eLink: USPTO Full Text Retrieval Options
12/5/4 (Item 2 from file: 73)
DIALOG(R)File 73: EMBASE
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0078379367 **EMBASE No:** 2000428976
ASHP national survey of pharmacy practice in acute care settings: Monitoring, patient education, and wellness - 2000

Pedersen C.A.; Schneider P.J.; Santell J.P.; Kelly E.J.
Dept. of Pharm. Pract. and Admin., College of Pharmacy
Author email: jsantell@ashp.org
Corresp. Author/Affil: : Dept. of Pharm. Pract. and Admin., College of Pharmacy

American Journal of Health-System Pharmacy (Am. J. Health-Syst. Pharm.) (United States) December 1, 2000 , 57/23 (2171-2187)
CODEN: AHSPE **ISSN:** 1079-2082
Document Type: Journal ; Article **Record Type:** Abstract
Language: English **Summary language:** English
Number of References: 11

Results of the 2000 ASHP national survey of pharmacy practice in acute care settings that pertain to patient medication monitoring, education, and wellness are presented. Pharmacy directors at 1063 general and children's medical-surgical hospitals in the United States were surveyed by mail. The response rate was 50.2%. Although the respondents indicated that most pharmacists spent less than 20% of their time on **medication- monitoring** activities, the **amount** of time devoted to such activities was increasing. Pharmacists were selective about which patients they chose to monitor for medication-related problems. Patients were frequently chosen on the basis of service or **medication**. **Pharmacists used** a **number** of mechanisms to **monitor** patients for adverse drug events (ADEs). Although internal ADE reporting had generally increased within the preceding three years, 81% of the institutions had implemented strategies to improve reporting. When ADEs were reported externally (59% of the respondents), FDA was most commonly alerted. About 92% of the respondents indicated that nursing had primary responsibility for counseling patients about medications. Pharmacists were infrequently involved in medication education during the hospital stay; however, 48% of the institutions used some method to identify patients needing counseling by pharmacists. Slightly more than half of the respondents reported having wellness programs. Pharmacists were most commonly involved in disease-based wellness programs. Pharmacists in acute care settings appear to be well positioned to improve the patient-monitoring, education, and wellness components of the medication-use process.

Medical Descriptors:
* clinical practice; *pharmacy
article; drug information; drug safety; food and drug administration; medical society; patient education; patient monitoring; priority journal; United States
SECTION HEADINGS:
Public Health, Social Medicine and Epidemiology

Dialog eLink: USPTO Full Text Retrieval Options
12/5/7 (Item 5 from file: 73)
DIALOG(R)File 73: EMBASE
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0071756881 **EMBASE No:** 1980010890
Development in prescribing of opiates in the GFR from 1974 to 1978

ENTWICKLUNG DER BETAUBUNGSMITTEL-VERSCHREIBUNGEN IN DEN JAHREN 1974 BIS 1978
Junge W.K.
Inst. Arzneimittel Bundesgesundh. Amt, 1000 Berlin 30, Germany
Corresp. Author/Affil: : Inst. Arzneimittel Bundesgesundh. Amt, 1000 Berlin 30, Germany

Deutsche Apotheker Zeitung (DTSCH. APOTH. ZTG.) (Germany) December 1, 1979 , 119/41 (1666-1667)
CODEN: DAZEA **ISSN:** 0011-9857
Document Type: Journal **Record Type:** Abstract
Language: German

Since implementation of the opiate prescribing law on 1st April 1974, as a result of which the comprehensive regulations applicable since 1930 were discarded, there has been no documentation concerning the scope of opiate prescribing in the German Federal Republic including West Berlin. In this connection in the first quarter of 1974 the **number** of opiate **prescriptions** filled (**taken** from compulsory **records** in **pharmacies**) was given separately, so that from this an indication could be gained of the number of opiate prescriptions before introduction of the special prescription. Furthermore, the prescriptions were classified according to whether issued for patient, animal, for the use of medical, dental or veterinary practice, or for the use of hospitals, dental or veterinary clinics.

Drug Descriptors:
* opiate
Medical Descriptors:
* prescription
geographic distribution; prevention
CAS Registry Number: 53663-61-9, 8002-76-4, 8008-60-4 (opiate)
SECTION HEADINGS:
Drug Dependence, Alcohol Abuse and Alcoholism

Dialog eLink: USPTO Full Text Retrieval Options
12/5/8 (Item 1 from file: 155)
DIALOG(R)File 155: MEDLINE(R)

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12396749 **PMID:** 9154361 **Record Identifier:** PMC2255534
Medication use and rural seniors. Who really knows what they are taking?

Torrible S J; Hogan D B
Health Sciences Centre, Calgary, AB.
Canadian family physician Medecin de famille canadien (CANADA) May 1997 , 43 p893-8 , **ISSN:** 0008-350X--Print
Journal Code: 0120300
Publishing Model Print
Document type: Journal Article; Research Support, Non-U.S. Gov't
Languages: ENGLISH
Main Citation Owner: NLM
Other Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS
OBJECTIVE: To determine whether listings of current medications obtained from the office file of patients' attending physicians and the pharmacy record of patients' dispensing pharmacists corresponded to the actual use of medications in a group of non-institutionalized seniors residing in rural communities. DESIGN: In-home interviews followed by retrospective office chart and pharmacy database reviews. SETTING: Two rural communities in southern Alberta with populations of less than 7000 people. PARTICIPANTS: Twenty-five patients aged 75 years or older residing in the study communities, eight family physicians, and four dispensing **pharmacies**. MAIN OUTCOME MEASURES: **Number** of currently **consumed prescription drugs**, currently **consumed** over-the-**counter** (OTC) drugs, and stored or discontinued prescribed medications; knowledge of medications (prescribed, OTC, and stored) by family physicians and pharmacists; and number of prescribers or dispensing pharmacists. RESULTS: Patients took a mean of 56 prescribed medications, took a mean of 3.5 OTC medications, and had a mean of 2.0 stored or discontinued medications. Attending family physicians and primary dispensing pharmacists typically knew of only some of their patients' entire regimen of medications. CONCLUSIONS: Misinformation about medication consumption by seniors was common among health care providers. Undertaking routine medication reviews (with emphasis on OTC use), asking specific questions about actual consumption, encouraging use of one prescriber and one pharmacist, discouraging storage of discontinued medications and reducing use of medication samples should be of benefit.
Tags: Female; Male
Descriptors: *Aged; *Drug Prescriptions; *Drug Therapy--utilization--UT; *Nonprescription Drugs--therapeutic use--TU; *Rural Health ; Aged, 80 and over; Alberta; Drug Utilization; Health Knowledge, Attitudes, Practice; Humans; Patient Education as Topic; Pharmacists; Physicians, Family; Questionnaires; Retrospective Studies
CAS Registry No.: 0 (Nonprescription Drugs)
Record Date Created: 19970624
Record Date Completed: 19970624

Dialog eLink: USPTO Full Text Retrieval Options
12/5/9 (Item 1 from file: 74)
DIALOG(R)File 74: Int.Pharm.Abs
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00027526 12-3352
PRESCRIPTION RECORD SYSTEMS--A SURVEY

Brown, V. J.; Sommers, E. B.
Oklahoma Univ. College of Pharmacy, Norman, Oklahoma
J. Am. Pharm. Assoc., VNS13, (Jul), p345-348, 1973
CODEN: JPHAA3 **ISSN:** 0003-0465 **Language:** English **Record Type:** Abstract

The use of prescription record systems by Oklahoma community pharmacists was surveyed.

The data obtained from this survey indicate--(1) a significant **number** of pharmacies do **not** maintain **prescription record** systems; (2) that a significant **number** of **prescription record** systems being **used** are not complete patient **drug** histories;

(3) that a significant **number** (73%) of pharmacies are satisfied with incomplete prescription **record** systems that are now being used; (4) that the systems should be studied and made uniform and complete as to the information needed and recorded.

The average prescription record system was principally concerned with the prescription order and was not adequate in many instances to provide a drug history sufficient for the preparation of a patient profile record. The time required to maintain the records was the major reason for dissatisfaction with a system. Of the pharmacists who used a system, 56.7% checked the patients' records for drug incompatibilities and 35.4% checked for allergies and drug reactions. (7 references)

Descriptors: Patient information -- profile, pharmacy, community, Oklahoma, survey of record systems; Prescriptions -- records, pharmacy, community, survey of Oklahoma systems; Pharmacy, community -- patient information, profile, survey of record systems; Oklahoma -- patient information, profile, survey of community pharmacy record systems; Records -- patient information, profile, survey of Oklahoma community pharmacists usage
Section Headings: Pharmacy practice (24)

12/5/10 (Item 1 from file: 35)
DIALOG(R)File 35: Dissertation Abs Online
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01299847 ORDER NO: AAD93-20060
THE USE OF ANTABUSE AS AN ADJUNCT TO ALCOHOLISM TREATMENT: A FOCUS ON PATIENT COMPLIANCE

Author: SPINRAD, SUSAN IRENE
Degree: PH.D.
Year: 1993
Corporate Source/Institution: UNIVERSITY OF CALIFORNIA, LOS ANGELES (0031)
Chair: IRVING MALTZMAN
Source: Volume 5403B of Dissertations Abstracts International.
PAGE 1685 . 129 PAGES
Descriptors: PSYCHOLOGY, CLINICAL; HEALTH SCIENCES, MENTAL HEALTH; HEALTH SCIENCES, EDUCATION
Descriptor Codes: 0622; 0347; 0350

Alcoholism treatment outcome studies generally demonstrate disappointingly low recovery rates. Antabuse is a cost-efficient adjunct to alcoholism treatment which is very effective at promoting abstinence when taken regularly, however studies have shown discontinuation rates as high as 100% within three months. Although studies indicate that interventions designed to increase external pressure to comply can produce some improvement in Antabuse compliance, the effectiveness and enforceability of coercion in lower-functioning alcoholics has not been demonstrated. The present study, conducted with 134 men (60 Whites, 64 African Americans and 10 others) seeking inpatient alcohol abuse treatment at a VA substance abuse program, evaluated the effectiveness of three treatment conditions on compliance to recommended Antabuse regimens and assessed individual differences which could account for some of the variance in compliance overall and within these groups. The experimental condition featured ingestion of Antabuse combined with peer-counseling where patients taking Antabuse promoted its usefulness to newer patients who were not yet taking it. These subjects also received the recommendation to continue taking Antabuse daily for one year after leaving the program. In the traditional condition, patients did not do peer-counseling; they received the recommendation to take Antabuse daily for one year after leaving the program, and were advised to take their first pill once they left the program. In the control condition, subjects did not do peer-counseling, they did not receive the recommendation to take Antabuse daily for one year, and they were free to choose to take Antabuse while in the program or not. VA **pharmacy records** for all subjects were **used** to ascertain the **number** of Antabuse **pills** subjects ordered two and six months after discharge. A significant ethnicity-group interaction was found where White subjects ordered the most Antabuse coming from the control condition and African American subjects ordered the most Antabuse coming from the experimental condition. Overall, control group subjects who chose to take Antabuse while in the program ordered significantly more Antabuse during follow-up than did all other subjects. Subjects' reported intentions about taking Antabuse and remaining abstinent after leaving the program significantly predicted the amount of Antabuse they ordered during follow-up.

12/5/11 (Item 1 from file: 583)
DIALOG(R)File 583: Gale Group Globalbase(TM)
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06112079
Overworked and underpaid?

UK: NHS DISPENSING WORKLOAD RISES 26%
Chemist & Druggist (CTD) 11 Feb 1995 p.202
Language: ENGLISH

The last decade has seen the NHS dispensing workload of pharmacists rise by 26%, according to the Office of Health Economics' Compendium of Health Statistics, 1995. However, the income of **pharmacists**, when **taken** as a percentage of **total** spending on **pharmaceutical** services, is currently at a **record** low. There were 12,305 UK chemist and appliance contractors in 1993, up by 6% over 1984. Dispensed prescriptions increased to 512mn for the same period from 396mn. The income of pharmacists in 1993 was approximately GBP 792mn, 19% of the gross cost in total of pharmaceutical services. The last two decades has seen this percentage declining steadily. Between 1984-93, the number of doctors dispensing rose by 30%, with the number of items on the NHS dispensed by them increasing by 4.3%, in comparison with the 3.2% increase the pharmacists and appliance contractors reported. There was a more than trebling in the number of dispensers that GPs employed. The statistics show that the ratio in the UK of pharmacists to population continued to be almost unchanged at 21 per 100,000 population. This puts the UK among the lowest of the OECD countries.

Company: OFFICE OF HEALTH ECONOMICS

Product: Ethical Products (2834EL);
Event: Market & Industry News (60); Sales & Consumption (65); Personal Income (52);
Country: United Kingdom (4UK);

Dialog eLink: USPTO Full Text Retrieval Options

24/5/1 (Item 1 from file: 155)
DIALOG(R)File 155: MEDLINE(R)
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09254324 **PMID:** 2672804
Point-of-service computer system and drug-use evaluation: implications for pharmacy practice in ambulatory care.

Sturek J K
The Prudential, Roseland, NJ 07068.
American journal of hospital pharmacy (UNITED STATES) Jul 1989 , 46 (7 Pt 2) pS17-20 , **ISSN:** 0002-9289--Print
Journal Code: 0370474
Publishing Model Print
Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS
The point-of-service (POS) computer system and its possible effects on ambulatory-care pharmacy practice are described. The POS system, a key component of the Medicare Catastrophic Coverage Act, is an **electronic** claims-transmittal device to be installed in community **pharmacies**. The system transmits information about the patient and the prescribed drug to a claims processor, which verifies the eligibility of the patient for Medicare **drug** benefits, determines the **amount** of payment allowed, and **sends** information **back** to the POS terminal in less than 30 seconds. Because prescription information can be consolidated into a central data pool, drug-use patterns can be reviewed. The system will also permit automated screening of

drug-drug interactions. Problems posed by the POS system relate to (1) the lack of a claims-transmittal device that can communicate with all claims processors, (2) the lack of a direct interface between the POS system and all pharmacy computer systems, (3) the expense of training personnel to operate the POS system, (4) the cost incurred by pharmacies in installing the POS system, and (5) the conflict between protecting the privacy of a patient's drug profile and permitting the monitoring of drug interactions. The catastrophic coverage act proposes that POS data be used to assess the appropriateness of drug use with a focus on outcome and quality-of-care issues; for the full intent of the act to be achieved, the components of an effective drug-use-evaluation program must be employed. Drug-use evaluation should eventually decrease health-care costs and improve quality of care.(ABSTRACT TRUNCATED AT 250 WORDS)
Descriptors: *Ambulatory Care Information Systems; *Information Systems; *Insurance, Pharmaceutical Services--organization and administration--OG; *Pharmacy Service, Hospital--organization and administration--OG **;** Catastrophic Illness; Computers; Drug Utilization; Humans; Medicare; Pharmacists; United States
Record Date Created: 19891003
Record Date Completed: 19891003

Dialog eLink: USPTO Full Text Retrieval Options
24/5/2 (Item 2 from file: 155)
DIALOG(R)File 155: MEDLINE(R)
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07008359 **PMID:** 7148864
Trends in radiopharmaceutical dispensing in a regional nuclear pharmacy.

Basmadjian G P; Johnston J; Barker K; Ice R D
American journal of hospital pharmacy (UNITED STATES) Nov 1982 , 39 (11) p1933-6 , **ISSN:** 0002-9289--Print
Journal Code: 0370474
Publishing Model Print
Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS
Dispensing trends for radiopharmaceuticals at a regional nuclear pharmacy over a 51-month period were studied. dispensing records of a regional nuclear pharmacy were analyzed with a forecasting procedure that uses univariate time data to produce time trends and autoregressive models. The overall **number** of **prescriptions** increased from 3500 to 5500 per quarter. Radiopharmaceuticals used in nuclear cardiology studies increased from less than 0.1% to 17.5% of **total prescriptions** dispensed, while radiopharmaceuticals **used** for brain imaging showed a steady decline from 29% to 11% of **total prescriptions** dispensed. The demand for other radiopharmaceuticals increased in areas such as renal studies, bone studies, lung studies, liver-function studies, and Ga-67 tumor-uptake studies, and declined slightly for static liver studies. Changes in dispensing trends for radiopharmaceuticals will continue as the practice of nuclear medicine concentrates more on functional studies and as newer imaging techniques become used for other purposes.
Descriptors: *Hospital Departments--trends--TD; *Hospital **Shared** Services; *Nuclear Medicine Department, Hospital--trends--TD; ***Pharmacy** Service, Hospital--trends--TD; *Radioisotopes--diagnostic use--DU **;** Drug Prescriptions; Drug Utilization; Oklahoma
CAS Registry No.: 0 (Radioisotopes)
Record Date Created: 19830127
Record Date Completed: 19830127

Dialog eLink: USPTO Full Text Retrieval Options
24/5/3 (Item 1 from file: 74)
DIALOG(R)File 74: Int.Pharm.Abs
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00192524 28-13463

REDUCTION OF COSTS AND DRUG CONSUMPTION IN PROLONGED CARE THROUGH THE IMPACT OF A PHARMACIST

Bussieres, J. F.; Lepage, Y.
Cite de la Sante de Laval, 1755 boul. Rene Laennec, Laval, Quebec, Canada H7M 3L9
Canadian Journal of Hospital Pharmacy (Canada), V44, (3), p121-129, 1991
CODEN: CJHPAV **ISSN:** 0008-4123 **Language:** French **Summary Language:** English **Record Type:** Abstract

A pilot study was conducted to determine the clinical and administrative impact of an on-**site** **pharmacist** on a group of 50 patients (average age 79.8 yr) in a long term health care facility using data pertaining to drug consumption collected over 16 months; the information was **used** to assess **drug** use in 70 patients.

The **quantity** of **drugs** prescribed on a regular basis decreased by 42.5% and the **quantity** of **drugs** prescribed on an as-needed basis decreased by 53.4%. Consequently, the number of doses administered regularly and as needed decreased by 55% and 58.4%, respectively. Additionally, the annual budget related to drug costs decreased by 20.4%. (22 references)

Descriptors: Long term care facilities -- drug utilization, geriatrics, pharmacists role ; Pharmacists -- long term care facilities, role, drug utilization, geriatrics; Drug utilization -- geriatrics, long term care facilities, pharmacists role; Geriatrics -- drug utilization, long term care facilities , pharmacists role; Costs -- drugs, long term care facilities, pharmacists role; Rational therapy -- geriatrics, long term care facilities, pharmacists role
Section Headings: Institutional pharmacy practice (02) ; Sociology, economics & ethics (22)

Dialog eLink: USPTO Full Text Retrieval Options
24/5/4 (Item 2 from file: 74)
DIALOG(R)File 74: Int.Pharm.Abs
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00148442 25-12781

ASSESSMENT OF CONSULTANT PHARMACY SERVICES IN WYOMING NURSING HOMES

Lundin, S. L.
VA Med. Ctr., Prescott, AZ
Consultant Pharmacist (USA), V2, (May-Jun), p225-231, 1987
CODEN: CNPHEB **ISSN:** 0888-5109 **Language:** English **Record Type:** Abstract

The quality and level of consultant **pharmacy** services were evaluated through on-**site** review of patient records in 27 Wyoming nursing homes during summer 1985.

It was found that consultant pharmacists in Wyoming nursing homes, many of whom are in rural settings, appeared to identify a fraction of potential **drug**-related problems among residents. The **number** of **medications** **used** per patient, however, appears to be similar to the nationally accepted norm. (11 references)

Descriptors: Pharmacists consultant -- services, quality, level, Wyoming; Nursing homes -- pharmacists consultant, services, quality, level; Wyoming -- pharmacists consultant, services, quality, level
Section Headings: Institutional pharmacy practice (02)

Dialog eLink: USPTO Full Text Retrieval Options
27/5/1 (Item 1 from file: 73)
DIALOG(R)File 73: EMBASE
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0081663476 **EMBASE No:** 2007096993

Implementation of an electronic system for medication reconciliation

Kramer J.S.; Hopkins P.J.; Rosendale J.C.; Garrelts J.C.; Hale L.S.; Nester T.M.; Cochran P.; Eidem L.A.; Haneke R.D.
Department of Pharmacy, Wesley Medical Center (WMC), Wichita, KS, United States; Department of Pharmacy, Wesley Medical Center, 550 North Hillside, Wichita, KS 67214-4976, United States
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American Journal of Health-System Pharmacy (Am. J. Health-Syst. Pharm.) (United States) February 15, 2007 , 64/4 (404-422)
CODEN: AHSPE **ISSN:** 1079-2082
Item Identifier (DOI): 10.2146/ajhp060506
Document Type: Journal ; Article **Record Type:** Abstract
Language: English **Summary language:** English
Number of References: 51

Purpose. The feasibility of implementing an **electronic** system for targeted **pharmacist**- and nurse-conducted admission and discharge medication reconciliation and its effects on patient safety, cost, and satisfaction among providers and nurses were studied. Methods. This study was conducted in two phases: a preimplementation phase and a postimplementation phase. In the preimplementation phase, admission medication histories and discharge medication counseling followed standard care processes. During postimplementation, **pharmacists** and nurses collaborated to **electronically** complete admission and discharge medication reconciliation documentation. Four reports were developed for medication reconciliation documentation: (1) home medication profile report, (2) home medication reconciliation report, (3) discharge medication reconciliation report, and (4) patient discharge medication report. Patients were contacted after discharge to measure their satisfaction with the medication counseling and medication instructions received. Health care providers completed a survey indicating their satisfaction with the electronic **medication** reconciliation processes. Results. A **total** of 283 patients were included in the study. Patients in the postimplementation group took significantly more **prescription** and nonprescription **medications**, and their **total number** of **medications** significantly exceeded the **number taken** by the preimplementation group. **Pharmacists** completed significantly more dosage changes in the postimplementation phase than in the preimplementation phase. In the preimplementation phase, nurses identified more incomplete medication orders, dosage changes, and allergies than they did in the postimplementation phase. Patients in the postimplementation group reported a higher level of agreement on all survey items regarding adequate discharge medication instructions. Conclusion. Patients who had their medications electronically reconciled reported a greater understanding of the medications they were to take after discharge from the hospital, including medication administration instructions and potential adverse effects. Copyright (c) 2007, American Society of Health-System Pharmacists, Inc. All rights reserved.

Medical Descriptors:
* drug monitoring; *electronic medical record
adult; article; female; hospital admission; hospital discharge; human; major clinical study; male; medical documentation; nurse; outcome assessment; patient information; patient safety; patient satisfaction; pharmacist; priority journal
SECTION HEADINGS:
Public Health, Social Medicine and Epidemiology
Biophysics, Bioengineering and Medical Instrumentation

Dialog eLink: USPTO Full Text Retrieval Options
27/5/2 (Item 2 from file: 73)
DIALOG(R)File 73: EMBASE
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0079907892 **EMBASE No:** 2004092834
Unclaimed prescriptions after automated prescription transmittals to phamacies

Ekedahl A.; Mansson N.
Department of Community Medicine, Lund University, Sweden; Natl. Corp. of Swedish Pharmacies, Apoteket Vipan,

Nobelvagen 36, SE-214 33 Malmo, Sweden
Author email: anders.ekedahl@apoteket.se
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Pharmacy World and Science (Pharm. World Sci.) (Netherlands) February 1, 2004 , 26/1 (26-31)
CODEN: PWSCE **ISSN:** 0928-1231
Item Identifier (DOI): 10.1023/B:PHAR.0000013464.09197.41
Document Type: Journal ; Article **Record Type:** Abstract
Language: English **Summary language:** English
Number of References: 32

Objective: To assess the extent of and the reasons for unclaimed prescriptions, primary non-compliance, after automated transmittals to pharmacies. Methods: Cross-sectional study in 3 health care districts (population 240,000) in the southernmost of Sweden on unclaimed **electronic** prescriptions (e-prescriptions), transmitted to 21 **pharmacies** during the period of 3 months (2000) and semi-structured interview study with patients not claiming their e-prescriptions transmitted to 4 pharmacies during a period of 3 weeks (2001). Main outcome measure: Proportion of unclaimed e-**prescriptions** of **total number** of (dispensed and unclaimed) e-**prescriptions** and reasons for primary non-compliance. Results: In **total**, 2171 (2.4%) e-**prescriptions remained** unclaimed at the **pharmacies**. The peak non-redemption rate was observed for those 15-24 years old (5.5%). The lowest rate was observed for those 65-74 years old. Men had a higher non-redemption rate than women. The highest rate for men was observed 25-34 years old (6.6%). Drugs for the musculoskeletal system (ATC group M) had higher non-redemption rates than expected (3.9%), and antibiotics (ATC-group J) lower (1.7%). Adolescents and young adults, 15-24 years old, had high non-compliance rates for drugs for the musculoskeletal system (14%) and anti-asthmatic drugs (11%). Of 78 interviewed patients, not claiming their e-prescriptions, 61% reported no need to have the prescription dispensed. However, unintentional non-compliance was reported by 28%, most of them were not aware that a prescription had been transmitted to the pharmacy. Thirteen percent reported that non-redemption had given further medical problems or made obtaining a new prescription necessary. Conclusion: Primary non-compliance was generally low, but there were differences related to age, gender and type of drugs. The most common reason reported for non-redemption was that the prescription was not needed, but some patients were unaware that prescriptions were issued and transmitted to the pharmacy.

Medical Descriptors:
* automation; *pharmacy; *prescription
adolescent; adult; age distribution; article; community care; female; human ; major clinical study; male; patient compliance; sex difference; Sweden
SECTION HEADINGS:
Public Health, Social Medicine and Epidemiology
Health Policy, Economics and Management

Dialog eLink: USPTO Full Text Retrieval Options
27/5/3 (Item 1 from file: 155)
DIALOG(R)File 155: MEDLINE(R)
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17713700 **PMID:** 17299180
Implementation of an electronic system for medication reconciliation.

Kramer Joan S; Hopkins Paula J; Rosendale James C; Garrelts James C; Hale LaDonna S; Nester Tina M; Cochran Patty; Eidem Leslie A; Haneke Robert D
Department of Pharmacy, Wesley Medical Center, Wichita, KS 67214-4976, USA.
American journal of health-system pharmacy - AJHP - official journal of the American Society of Health-System Pharmacists (United States) Feb 15 2007 , 64 (4) p404-22 , **ISSN:** 1079-2082--Print **Journal Code:** 9503023
Publishing Model Print; Erratum in Am J Health Syst Pharm. 2007 Apr 1;64(7) 684
Document type: Journal Article; Research Support, Non-U.S. Gov't

Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS
PURPOSE: The feasibility of implementing an **electronic** system for targeted **pharmacist**- and nurse-conducted admission and discharge medication reconciliation and its effects on patient safety, cost, and satisfaction among providers and nurses were studied. METHODS: This study was conducted in two phases: a preimplementation phase and a postimplementation phase. In the preimplementation phase, admission medication histories and discharge medication counseling followed standard care processes. During postimplementation, **pharmacists** and nurses collaborated to **electronically** complete admission and discharge medication reconciliation documentation. Four reports were developed for medication reconciliation documentation: (1) home medication profile report, (2) home medication reconciliation report, (3) discharge medication reconciliation report, and (4) patient discharge medication report. Patients were contacted after discharge to measure their satisfaction with the medication counseling and medication instructions received. Health care providers completed a survey indicating their satisfaction with the electronic **medication** reconciliation processes. RESULTS: A **total** of 283 patients were included in the study. Patients in the postimplementation group took significantly more **prescription** and nonprescription **medications**, and their **total number** of **medications** significantly exceeded the **number taken** by the preimplementation group. **Pharmacists** completed significantly more dosage changes in the postimplementation phase than in the preimplementation phase. In the preimplementation phase, nurses identified more incomplete medication orders, dosage changes, and allergies than they did in the postimplementation phase. Patients in the postimplementation group reported a higher level of agreement on all survey items regarding adequate discharge medication instructions. CONCLUSION: Patients who had their medications electronically reconciled reported a greater understanding of the medications they were to take after discharge from the hospital, including medication administration instructions and potential adverse effects.
Tags: Female; Male
Descriptors: *Continuity of Patient Care--organization and administration--OG; *Medical Records Systems, Computerized--organization and administration--OG; *Patient Discharge; *Pharmacy Service, Hospital--organization and administration--OG ; Aged; Humans; Medical History Taking--methods--MT; Medical Staff, Hospital --education--ED; Medication Errors--prevention and control--PC; Middle Aged ; Nursing Staff, Hospital--education--ED; Patient Participation; Patient Satisfaction; Process Assessment (Health Care)--organization and administration--OG
Record Date Created: 20070214
Record Date Completed: 20070326

Dialog eLink: USPTO Full Text Retrieval Options
27/5/4 (Item 2 from file: 155)
DIALOG(R)File 155: MEDLINE(R)
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15837654 **PMID:** 15018256
Unclaimed prescriptions after automated prescription transmittals to pharmacies.

Ekedahl Anders; Mansson Niclas
Department of Community Medicine, Lund University, Sweden. anders.ekedahl@apoteket.se
Pharmacy world & science - PWS (Netherlands) Feb 2004 , 26 (1) p26-31 , **ISSN:** 0928-1231--Print **Journal Code:** 9307352
Publishing Model Print
Document type: Comparative Study; Journal Article; Research Support, Non-U.S. Gov't
Languages: ENGLISH
Main Citation Owner: NLM
Record type: MEDLINE; Completed
Subfile: INDEX MEDICUS
OBJECTIVE: To assess the extent of and the reasons for unclaimed prescriptions, primary non-compliance, after automated transmittals to pharmacies. METHODS: Cross-sectional study in 3 health care districts (population 240,000) in the southernmost of Sweden on unclaimed **electronic** prescriptions (e-prescriptions), transmitted to 21 **pharmacies** during the period of 3 months (2000) and semi-structured interview study with patients not claiming their e-prescriptions transmitted to 4 pharmacies during a period of 3 weeks (2001). MAIN OUTCOME MEASURE: Proportion of unclaimed e-**prescriptions**

of **total number** of (dispensed and unclaimed) e-**prescriptions** and reasons for primary non-compliance. RESULTS: In **total**, 2171 (2.4%) e-**prescriptions remained** unclaimed at the **pharmacies**. The peak non-redemption rate was observed for those 15-24 years old (5.5%). The lowest rate was observed for those 65-74 years old. Men had a higher non-redemption rate than women. The highest rate for men was observed 25-34 years old (6.6%). Drugs for the musculoskeletal system (ATC group M) had higher non-redemption rates than expected (3.9%), and antibiotics (ATC-group J) lower (1.7%). Adolescents and young adults, 15-24 years old, had high non-compliance rates for drugs for the musculoskeletal system (14%) and anti-asthmatic drugs (11%). Of 78 interviewed patients, not claiming their e-prescriptions, 61% reported no need to have the prescription dispensed. However, unintentional non-compliance was reported by 28%, most of them were not aware that a prescription had been transmitted to the pharmacy. Thirteen percent reported that non-redemption had given further medical problems or made obtaining a new prescription necessary. CONCLUSION: Primary non-compliance was generally low, but there were differences related to age, gender and type of drugs. The most common reason reported for non-redemption was that the prescription was not needed, but some patients were unaware that prescriptions were issued and transmitted to the pharmacy.
Tags: Female; Male
Descriptors: *Drug Prescriptions--statistics and numerical data--SN; ***Internet**; *Patient Compliance--statistics and numerical data--SN; ***Pharmacies** --statistics and numerical data--SN **;** Adolescent; Adult; Age Factors; Aged; Child; Child, Preschool; Hospitals; Humans; Infant; Infant, Newborn; Interviews as Topic; Middle Aged; Sex Factors; Sweden
Record Date Created: 20040315
Record Date Completed: 20040602

Dialog eLink: USPTO Full Text Retrieval Options
27/5/5 (Item 1 from file: 34)
DIALOG(R)File 34: SciSearch(R) Cited Ref Sci
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16088309 **Genuine Article#:** 137VM **Number of References:** 53
Implementation of an electronic system for medication reconciliation

Author: Kramer JS (REPRINT) ; Hopkins PJ; Rosendale JC; Garrelts JC; Hale LS; Nester TM; Cochran P; Eidem LA; Haneke RD
Corporate Source: Wesley Med Ctr,Dept Pharm,550 N Hillside/Wichita//KS/67214 (REPRINT); Wesley Med Ctr,Dept Pharm,Wichita//KS/67214; Wesley Med Ctr,Dept Trauma & Surg,Wichita//KS/67214; Wichita State Univ,Coll Hlth Profess, Dept Phys Assistant,Wichita//KS/; Wesley Med Ctr,Dept Nursing,Wichita//KS/
Journal: AMERICAN JOURNAL OF HEALTH-SYSTEM PHARMACY , 2007 , V 64 , N4 (FEB 15) , P 404-422
ISSN: 1079-2082 **Publication date:** 20070215
Publisher: AMER SOC HEALTH-SYSTEM PHARMACISTS , 7272 WISCONSIN AVE, BETHESDA, MD 20814 USA
Language: English **Document Type:** ARTICLE
Geographic Location: USA
Journal Subject Category: PHARMACOLOGY & PHARMACY
Abstract: Purpose. The feasibility of implementing an **electronic** system for targeted **pharmacist**- and nurse-conducted admission and discharge medication reconciliation and its effects on patient safety, cost, and satisfaction among providers and nurses were studied..

Methods. This study was conducted in two phases: a preimplementation phase and a postimplementation phase. In the preimplementation phase, admission medication histories and discharge medication counseling followed standard care processes. During postimplementation, **pharmacists** and nurses collaborated to **electronically** complete admission and discharge medication reconciliation documentation. Four reports were developed for medication reconciliation documentation: (1) home medication profile report, (2) home medication reconciliation report, (3) discharge medication reconciliation report, and (4) patient discharge medication report. Patients were contacted after discharge to measure their satisfaction with the medication counseling and medication instructions received. Health care providers completed a survey indicating their satisfaction with the electronic **medication** reconciliation processes.

Results. A **total** of 283 patients were included in the study. Patients in the postimplementation group took significantly more prescription and nonprescription medications, and their **total number** of **medications** significantly exceeded the

number taken by the preimplementation group. **Pharmacists** completed significantly more dosage changes in the postimplementation phase than in the preimplementation phase. In the preimplementation phase, nurses identified more incomplete medication orders, dosage changes, and allergies than they did in the postimplementation phase. Patients in the postimplementation group reported a higher level of agreement on all survey items regarding adequate discharge medication instructions.

Conclusion. Patients who had their medications electronically reconciled reported a greater understanding of the medications they were to take after discharge from the hospital, including medication administration instructions and potential adverse effects.
Descriptors--Author Keywords: computers ; documentation ; dosage ; errors ; medication ; hospitals ; nurses ; patient information ; patient information ; pharmacists ; toxicity
Identifiers-- KeyWord Plus(R): ADVERSE DRUG EVENTS; CLINICAL PHARMACY SERVICES; HOSPITALIZED-PATIENTS; PATIENT SAFETY; ERRORS; HISTORIES; ADMISSION; DISCHARGE; DISCREPANCIES; POPULATION
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27/5/6 (Item 2 from file: 34)
DIALOG(R)File 34: SciSearch(R) Cited Ref Sci
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12445730 **Genuine Article#:** 767NC **Number of References:** 35
Unclaimed prescriptions after automated prescription transmittals to pharmacies

Author: Ekedahl A (REPRINT) ; Mansson N
Corporate Source: Lund Univ,Dept Community Med,S-22100 Lund//Sweden/ (REPRINT); Lund Univ,Dept Community Med,S-22100 Lund//Sweden/; Natl Corp Swedish Pharmacies,SE-21433 Malmo//Sweden/; Med Prod Agcy,Uppsala//Sweden/
Journal: PHARMACY WORLD & SCIENCE , 2004 , V 26 , N1 (FEB) , P 26-31
ISSN: 0928-1231 **Publication date:** 20040200
Publisher: KLUWER ACADEMIC PUBL , VAN GODEWIJCKSTRAAT 30, 3311 GZ DORDRECHT, NETHERLANDS
Language: English **Document Type:** ARTICLE
Geographic Location: Sweden
Journal Subject Category: CHEMISTRY, MULTIDISCIPLINARY; PHARMACOLOGY & PHARMACY
Abstract: Objective: To assess the extent of and the reasons for unclaimed prescriptions, primary non-compliance, after automated transmittals to pharmacies. Methods: Cross-sectional study in 3 health care districts (population 240,000) in the southernmost of Sweden on unclaimed **electronic** prescriptions (e-prescriptions), transmitted to 21 **pharmacies** during the period of 3 months (2000) and semi-structured interview study with patients not claiming their e-prescriptions transmitted to 4 pharmacies during a period of 3 weeks (2001). Main outcome measure: Proportion of unclaimed e-**prescriptions** of total **number** of (dispensed and unclaimed) e-**prescriptions** and reasons for primary non-compliance. Results: In **total**, 2171 (2.4%) e-**prescriptions remained** unclaimed at the **pharmacies**. The peak non-redemption rate was observed for those 15-24 years old (5.5%). The lowest rate was observed for those 65-74 years old. Men had a higher non-redemption rate than women. The highest rate for men was observed 25-34 years old (6.6%). Drugs for the musculoskeletal system (ATC group M) had higher non-redemption rates than expected (3.9%), and antibiotics (ATC-group J) lower (1.7%). Adolescents and young adults, 15-24 years old, had high non-compliance rates for drugs for the musculoskeletal system (14%) and anti-asthmatic drugs (11%). Of 78 interviewed patients, not claiming their e-prescriptions, 61% reported no need to have the prescription dispensed. However, unintentional non-compliance was reported by 28%, most of them were not aware that a prescription had been transmitted to the pharmacy. Thirteen percent reported that non-redemption had given further medical problems or made obtaining a new prescription necessary. Conclusion: Primary non-compliance was generally low, but there were differences related to age, gender and type of drugs. The most common reason reported for non-redemption was that the prescription was not needed, but some patients were unaware that prescriptions were issued and transmitted to the pharmacy.
Descriptors--Author Keywords: community **pharmacy** ; **electronic** prescriptions ; initial non-compliance ; non-redemption rate ; primary non-compliance ; unclaimed prescriptions ; Sweden
Identifiers-- KeyWord Plus(R): CARE; EMERGENCY; IMPACT; NONCOMPLIANCE; MEDICATIONS
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CRAGHEAD RM, 1991, V26, P632, HOSP PHARM
CRAGHEAD RM, 1991, V26, P616, HOSP PHARM
DONG BJ, 1998, V33, P841, HOSP PHARM
EKEDAHL A, 2002, V19, P137, J SOC ADMIN PHARM
FINCHAM JE, 1985, V20, P101, SOC SCI MED
GARDNER TL, 1996, V109, P69, NEW ZEAL MED J
GERDTHAM UG, 1996, V34, P1188, MED CARE
HARTERT TV, 2000, V48, P651, J AM GERIATR SOC
JONES I, 1998, V48, P903, BRIT J GEN PRACT
KATZ EF, 1971, V13, P50, HOSP ADM CANADA
KIRKING MH, 1995, V52, P490, AM J HEALTH-SYST PH
KIRKING MH, 1993, V28, P90, HOSP PHARM
KIRKING MH, 1993, V28, P94, HOSP PHARM
KIRKING MH, 1993, V28, P102, HOSP PHARM
KUBOTA M, 1993, V19, P84, JPN J HOSP PHARM
LASH S, 1995, V1, P193, J MANAGED CARE PHARM
LEU S, 1999, V12, P433, J PHARM PRACT
LOONG TW, 1999, V40, P691, SINGAPORE MED J
MATSUI D, 2000, V154, P195, ARCH PEDIAT ADOL MED
MCCAFFREY DJ, 1993, P58, US PHARM
SAUNDERS CE, 1987, V5, P283, AM J EMERG MED
SCHAFHEUTLE EI, 2002, V3, P11, INT J PHARM PRACT
SECNIK K, 2000, V31, P243, J AM PHARM ASSOC
SHIREMAN TI, 2002, V36, P557, ANN PHARMACOTHER
SKUTNIK S, 1997, V11, P35, J PHARM MARK MANAGE
TAVITIAN SM, 2001, V36, P1060, HOSP PHARM
THOMAS EJ, 1996, V27, P49, ANN EMERG MED
WATERS WH, 1976, V1, P1062, BRIT MED J
WATTS RW, 1997, V26, PS4, AUST FAM PHYSICIA S1

Dialog eLink: USPTO Full Text Retrieval Options
27/5/7 (Item 1 from file: 74)
DIALOG(R)File 74: Int.Pharm.Abs
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00443427 44-06443
IMPLEMENTATION OF AN ELECTRONIC SYSTEM FOR MEDICATION RECONCILIATION

Kramer, JS; Hopkins, PJ; Rosendale, JC; Garrelts, JC; Haneke, RD; et al
Wesley Med Ctr, Dept Pharm, 550 N Hillside, Wichita, KS 67214, USA joan.kramer@wesleymc.com
American Journal of Health-System Pharmacy (USA), V64, (4), p404-422, 2007
CODEN: AHSPEK **ISSN:** 1079-2082 **Language:** English **Record Type:** Abstract

Purpose. The feasibility of implementing an **electronic** system for targeted **pharmacist**- and nurse-conducted admission and discharge medication reconciliation and its effects on patient safety, cost, and satisfaction among providers and nurses were studied..

Methods. This study was conducted in two phases: a preimplementation phase and a postimplementation phase. In the preimplementation phase, admission medication histories and discharge medication counseling followed standard care processes. During postimplementation, **pharmacists** and nurses collaborated to **electronically** complete admission and discharge medication reconciliation documentation. Four reports were developed for medication reconciliation

documentation: (1) home medication profile report, (2) home medication reconciliation report, (3) discharge medication reconciliation report, and (4) patient discharge medication report. Patients were contacted after discharge to measure their satisfaction with the medication counseling and medication instructions received. Health care providers completed a survey indicating their satisfaction with the electronic **medication** reconciliation processes.

Results. A **total** of 283 patients were included in the study. Patients in the postimplementation group took significantly more **prescription** and nonprescription **medications**, and their **total number** of **medications** significantly exceeded the **number taken** by the preimplementation group. **Pharmacists** completed significantly more dosage changes in the postimplementation phase than in the preimplementation phase. In the preimplementation phase, nurses identified more incomplete medication orders, dosage changes, and allergies than they did in the postimplementation phase. Patients in the postimplementation group reported a higher level of agreement on all survey items regarding adequate discharge medication instructions.

Conclusion. Patients who had their medications electronically reconciled reported a greater understanding of the medications they were to take after discharge from the hospital, including medication administration instructions and potential adverse effects. (53 references)

Descriptors: Health care -- home; Hospitals -- discharge; Computers -- programs; Patient information -- computers; Administration -- hospital pharmacy; Errors, medication -- documentation; Interventions -- pharmaceutical care; Pharmacy, institutional, hospital -- administration; Documentation -- errors, medication; Pharmaceutical care -- interventions
Section Headings: Institutional pharmacy practice (02) ; Sociology, economics & ethics (22); Pharmacy practice (24)

27/5/8 (Item 2 from file: 74)
DIALOG(R)File 74: Int.Pharm.Abs
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00391775 41-17462
IMPLEMENTATION OF A RETURN PROCEDURE TO IMPACT PHARMACY COSTS

Shifrin, DI
Dept Pharm, 65 James St, Edison, NJ 08818, USA rpdanny@aol.com
ASHP Midyear Clinical Meeting, V39, (DEC), pP263D, 2004
Abstract of Meeting Presentation
Language: English **Record Type:** Abstract

Purpose: A plan to minimize discontinued medications stored in unauthorized locations throughout the institution was established.

Methods: A multi-disciplinary committee composed of pharmacists, pharmacy technicians, nurses, and a process engineer devised a discontinued medication policy. Labeled drawers on the nursing units served as standardized **sites** for returning discontinued medications. The committee worked with the **pharmacy** technicians to transport these medications to the pharmacy department, where they were credited to the patient. Excess medications were returned and credited on a daily basis. A baseline study and follow-up study were conducted on two nursing units.

Results: Initial baseline studies for the first nursing unit indicated that only 23.3% of discontinued medications were being returned to the pharmacy. The resulting dollar credit was $892. Similar results were found on the second nursing unit where 24.3% of discontinued medications were being returned to the pharmacy. This resulted in a dollar credit of $942. After the first month the studies were repeated. The first nursing unit demonstrated 68.7% of the **total** discontinued **medications** were being **returned** to the **pharmacy**, an increase of 45.4%. The resulting dollar credit for the returned medications was $1796. Similar results were found on the second nursing unit, where 72.8% of discontinued medications were returned, resulting in an increase of 48.5%. The cost savings rose to $1903.

Conclusion: By implementing a process of regular pick ups by the pharmacy technicians, discontinued medications were not permitted to accumulate on the nursing units. Instead, they were credited to the patient and placed back into stock, thereby reducing pharmacy costs.

Descriptors: ASHP meeting abstracts -- drug returns; Administration -- hospital pharmacy ; Inventory -- drug returns; Drugs -- returns; Pharmacy, institutional, hospital -- drug returns; Practice Interest Areas -- Quality Assurance/Drug Use Evaluation/Medication-Use Safety; meeting presentations

Section Headings: Institutional pharmacy practice (02) ; Sociology, economics & ethics (22)

Dialog eLink: USPTO Full Text Retrieval Options
27/5/9 (Item 3 from file: 74)
DIALOG(R)File 74: Int.Pharm.Abs
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00382485 41-08694
UNCLAIMED PRESCRIPTIONS AFTER AUTOMATED PRESCRIPTION TRANSMITTALS TO PHARMACIES

Ekedahl, A; Maansson, N
Univ Lund, Dept Community Med, S-22100 Lund, Sweden anders.ekedahl@apoteket.se
Pharmacy World and Science (Netherlands), V26, (1), p26-31, 2004
CODEN: PWSCED **ISSN:** 0928-1231 **Language:** English **Record Type:** Abstract

Objective: To assess the extent of and the reasons for unclaimed prescriptions, primary non-compliance, after automated transmittals to pharmacies.

Methods: Cross-sectional study in 3 health care districts (population 240,000) in the southernmost of Sweden on unclaimed **electronic** prescriptions (e-prescriptions), transmitted to 21 **pharmacies** during the period of 3 months (2000) and semi-structured interview study with patients not claiming their e-prescriptions transmitted to 4 pharmacies during a period of 3 weeks (2001).

Main outcome measure: Proportion of unclaimed e- **prescriptions** of **total number** of (dispensed and unclaimed) e-**prescriptions** and reasons for primary non-compliance. Results: In **total**, 2171 (2.4%) e-**prescriptions remained** unclaimed at the **pharmacies**. The peak non-redemption rate was observed for those 15-24 years old (5.5%). The lowest rate was observed for those 65-74 years old. Men had a higher non-redemption rate than women. The highest rate for men was observed 25-34 years old (6.6%). Drugs for the musculoskeletal system (ATC group M) had higher non-redemption rates than expected (3.9%), and antibiotics (ATC-group J) lower (1.7%). Adolescents and young adults, 15-24 years old, had high non-compliance rates for drugs for the musculoskeletal system (14%) and anti-asthmatic drugs (11%). Of 78 interviewed patients, not claiming their e-prescriptions, 61% reported no need to have the prescription dispensed. However, unintentional non-compliance was reported by 28%, most of them were not aware that a prescription had been transmitted to the pharmacy. Thirteen percent reported that non-redemption had given further medical problems or made obtaining a new prescription necessary. Conclusion: Primary non-compliance was generally low, but there were differences related to age, gender and type of drugs. The most common reason reported for non-redemption was that the prescription was not needed, but some patients were unaware that prescriptions were issued and transmitted to the pharmacy. (35 references)

Descriptors: Computers -- prescriptions; Pharmacy, community -- prescriptions; Compliance -- patients; Dispensing -- prescriptions; Data collection -- patients; Demographics -- patients; Prescriptions -- computers; Patients -- compliance
Section Headings: Pharmacy practice (24) ; Information processing & literature (25)

B. NPL Files, Full-text

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File  20:Dialog Global Reporter 1997-2009/Jun 04
         (c) 2009 Dialog
File  15:ABI/Inform(R) 1971-2009/Jun 03
         (c) 2009 ProQuest Info&Learning
File 610:Business Wire 1999-2009/Jun 04
         (c) 2009 Business Wire.
File 810:Business Wire 1986-1999/Feb 28
         (c) 1999 Business Wire
File 613:PR Newswire 1999-2009/Jun 04
         (c) 2009 PR Newswire Association Inc
File 813:PR Newswire 1987-1999/Apr 30
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         (c) 1999 PR Newswire Association Inc
File 634:San Jose Mercury  Jun 1985-2009/Jun 02
         (c) 2009 San Jose Mercury News
File 624:McGraw-Hill Publications 1985-2009/Jun 03
         (c) 2009 McGraw-Hill Co. Inc
File   9:Business & Industry(R) Jul/1994-2009/Jun 03
         (c) 2009 Gale/Cengage
File 275:Gale Group Computer DB(TM) 1983-2009/May 07
         (c) 2009 Gale/Cengage
File 621:Gale Group New Prod.Annou.(R) 1985-2009/Apr 29
         (c) 2009 Gale/Cengage
File 636:Gale Group Newsletter DB(TM) 1987-2009/May 13
         (c) 2009 Gale/Cengage
File  16:Gale Group PROMT(R) 1990-2009/May 13
         (c) 2009 Gale/Cengage
File 160:Gale Group PROMT(R) 1972-1989
         (c) 1999 The Gale Group
File 148:Gale Group Trade & Industry DB 1976-2009/May 20
         (c) 2009 Gale/Cengage
File 149:TGG Health&Wellness DB(SM) 1976-2009/May W1
         (c) 2009 Gale/Cengage
File 444:New England Journal of Med. 1985-2009/May W4
         (c) 2009 Mass. Med. Soc.
File 455:Drug News & Perspectives 1992-2005/Aug
         (c) 2005 Prous Science
File 129:PHIND(Archival) 1980-2009/May W2
         (c) 2009 Informa UK Ltd
File 130:PHIND(Daily & Current) 2009/Jun 04
         (c) 2009 Informa UK Ltd


Set     Items   Description
S1     288334   (AMOUNT OR NUMBER OR QUANTITY OR TOTAL OR HOW()(MANY OR MUCH)) (5N)
(MEDICATION? ? OR MEDICIN?? OR MEDICAMENT? ? OR DRUG? ? OR PILL? ? OR TABLET? ? OR
BOLUS OR MED OR MEDS OR CAPSULE? ? OR VITAMIN? ? OR SUPPLEMENT? ? OR PHARMACEUTICAL
OR PRESCRIPTION? ?)
S2      16016   S1 (10N) (MONITOR??? OR COUNT??? OR RECORD??? OR CAPTUR??? OR
TRACK??? OR DOCUMENT??? OR LOG OR LOGS OR EXTRACT???)
S3      12965   S1 (5N) ((GIV??? OR BRING??? OR BROUGHT OR TAK??? OR TOOK OR
SEND???)(2W)BACK OR RETURN?? OR LEFT OR REMAIN??? OR CONSUMED OR USED OR TAKEN)
KEN)
S4        689   S1 (5N) ("NOT" OR WASN()T OR DIDN()T)(3N)(USED OR CONSUMED OR TAKEN
OR FINISHED OR UTILI?ED)
S5        285   S3 (5N) (PHARMACY OR PHARMACIES OR DRUGSTORE? ? OR DRUG()(STORE? ?
OR CHAIN? ? OR OUTLET? ?) OR APATHECAR??? OR PHARMACIST? ? OR CHEMIST? ? OR
DISPENSAR???) ?)
S6     180082   (PHARMACY OR PHARMACIES OR DRUGSTORE? ? OR DRUG()(STORE? ? OR
CHAIN? ? OR OUTLET? ?) OR APATHECAR??? OR PHARMACIST? ? OR CHEMIST? ? OR
DISPENSAR???) (10N) (CONNECT??? OR LINK??? OR SHAR??? OR INTERCONNECT??? OR
INTERLINK??? OR NETWORK??? OR INTERNET OR INTRANET OR FAX??? OR FACSIMILE??? OR
ELECTRONIC? OR ONLINE OR ON()LINE OR WEBSITE? ? OR WEBPAGE? ? OR HOMEPAGE? ? OR WEB
OR SITE? ? OR PLATFORM? ? OR PORTAL? ? OR REALTIME OR REAL()TIME OR INTERACTIVE OR
DYNAMIC)
S7          2   AU=(KALIES, R? OR KALIES R? OR KALIES (1N) (R OR RALPH))
S8        746   S2 () (S3 OR S4)
S9         14   S8 (10N) S5
S10         6   S9 (S) S6
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S11          6   RD  (unique items)
S12          8   S9 NOT S11
S13          6   RD  (unique items)
S14         15   S8 (S) S6
S15          9   S14 NOT S9
S16          5   RD  (unique items)
S17      16004   S1 (S) S2
S18        795   S17 (S) (S3 OR S4)
S19         15   S18 (S) S6
S20          0   S19 NOT S14
S21       4044   S1 (S) S6
S22         85   S21 (S) (S3 OR S4)
S23         28   S22 NOT PY>2002
S24         22   RD  (unique items)
S25         17   S24 NOT (S9 OR S14)
S26         17   S6 () (S3 OR S4)
S27         10   S26 NOT (S9 OR S14 OR S25)
S28          5   RD  (unique items)
S29          0   S28 NOT PY>2002
S30        285   (S3 OR S4) () S5
S31          0   S20 (S) S2
S32         39   S30 (S) S6
S33         24   S32 NOT (S9 OR S14 OR S25)
S34          1   S33 NOT PY>2002
S35          0   S7 AND (S1 OR S6)
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11/3,K/1 (Item 1 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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66899355 **(USE FORMAT 7 OR 9 FOR
FULLTEXT)**
**Chattanooga: City's worker pharmacy plan is
bitter pill for local druggist**

Cliff Hightower

MCCLATCHY-TRIBUNE REGIONAL NEWS - CHATTANOOGA
TIMES/FREE PRESS - TENN
September 21, 2008

Journal Code: KCOO **Language:** English
Record Type: FULLTEXT
Word Count: 1005

**(USE
FORMAT 7 OR 9 FOR FULLTEXT)**
...part of contracts. Second, the city or county has to have enough employees to cover overhead costs. And most employees need to live near the **pharmacy** or it won't be **used.**

"You have to **capture** 'X' **amount** of **prescriptions** a day to cover your overhead," he said. "That's the bottom line."

Jeff Bernsten, lead organizer for the Service Employees International

Union in Chattanooga

11/3,K/2 (Item 2 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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36256586 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**
Milwaukee Doctor's Invention Could Ease Pill-Taking Troubles

Joe Manning

KRTBN KNIGHT-RIDDER TRIBUNE BUSINESS NEWS - THE
MILWAUKEE JOURNAL SEN
June 21, 2004

Journal Code: KMJS **Language:** English
Record Type: FULLTEXT
Word Count: 684

(USE FORMAT 7 OR 9 FOR FULLTEXT)
...even jail.

The new pill dispenser will also help battle problems of prescription errors, she said. With the device, patients cannot make a mistake and **electronic records** show physicians and **pharmacists how many pills** were **taken** and when.

The pill-dispensing system was displayed for the first time Saturday at a meeting of the American Society of Health System Pharmacists in...

11/3,K/3 (Item 3 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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05353664 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**
Drug Chain CVS to Buy Online Pharmacy

Chris Reidy
KRTBN
KNIGHT-RIDDER TRIBUNE BUSINESS NEWS (BOSTON GLOBE - MASSACHUSETTS)

May 18, 1999
Journal Code: KBGL

Language: English **Record Type:** FULLTEXT
Word Count:
686

**(USE
FORMAT 7 OR 9 FOR FULLTEXT)**
...Walgreen Co. and Rite Aid Corp., among others.

Recently, several upstarts, such as PlanetRx and Drugstore.com, a firm partly backed by Amazon.com, have **taken** to selling **prescription drugs**, over-the-**counter drugs**, and **vitamins** over the Internet.

How much of a threat these virtual **pharmacies** are to the big brick-and-mortar chains is still unclear, said analyst Eric Bosshard of Midwest Research. Several big chains, including CVS, have been...

13/3,K/1 (Item 1 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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09362496 **(USE FORMAT 7 OR 9 FOR
FULLTEXT)**
Repeat prescriptions drain our resources

Letter

M
Jackson
WESTERN DAILY PRESS , WDP Late
City ed , p 7
January 25, 2000
Journal Code:
FWDP **Language:** English **Record Type:** FULLTEXT

Word Count: 293

-
...excessive and very frequent wasteful and expensive prescribing of repeat prescriptions.

Let me explain: In Somerset, at the end of February 1998, there was a **county** overspend on **drugs** of GBP193,018. The **amount** of **returned**, prescribed unwanted **medicines** to **pharmacies** gave a value of GBP200,000 in one quarter of the same year: This equalled two per cent of the county drugs budget for the...

13/3,K/6 (Item 1 from file: 149)
DIALOG(R)File 149: TGG
Health&Wellness DB(SM)
(c) 2009 Gale/Cengage. All rights
reserved.

04114359 **Supplier Number:**
196440056 (USE FORMAT 7 OR 9 FOR FULL TEXT)

**Isoniazid completion rates for latent tuberculosis infection
among college students managed by a community pharmacist.(Clinical and Program**

Note)(Report)

Hess, Karl; Goad, Jeffery; Wu,
Joanne; Johnson, Kathleen
Journal of American
College Health , 57 , 5 , 553(3)
March-April ,

2009
Document Type: Report **Publication**
Format: Magazine/Journal
ISSN: 0744-8481
Language: English

Record Type: Fulltext; Abstract **Target Audience:**
Professional
Word Count: 2530
Line Count: 00208
...completers versus noncompleters in our community pharmacy LTBI clinic.
METHODS
This study was approved by our institutional review board for human subjects. Patients included in **the** analysis were those diagnosed with LTBI by student health clinicians, referred to the pharmacy LTBI clinic, and able to complete the full 9-month INH...

...additional tablets to compensate for missed doses, it was recorded in the clinic's spreadsheet, and the amount of INH dispensed was adjusted accordingly.

The **number** of **tablets taken** was assessed by the **pharmacist**'s **count** or as self-reported by the patient if his or her medication vial was not available at the time of visit. We assumed the number...

16/3,K/1 (Item 1 from file: 20)
DIALOG(R)File 20: Dialog
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58861737 **(USE FORMAT 7 OR 9 FOR**
FULLTEXT)
GRASSLEY Q & A: COMBATING METH

CAPITOL HILL PRESS RELEASES

September 21, 2007
Journal Code: WCAR
Language: English **Record Type:** FULLTEXT
Word Count:
546

(USE
FORMAT 7 OR 9 FOR FULLTEXT)
...across the country. This legislation limited the amount of drugs that can be used to make meth that a customer can buy and mandated that **pharmacies** keep written or **electronic** logbooks recording the

purchase of these drugs. The legislation also gave prosecutors and local law enforcement additional resources to fight meth on the frontlines and ...

...alone, according to the Drug Enforcement Agency. To build on that success, I recently introduced legislation that would strengthen the Combat Meth Act by requiring **pharmacies** to keep their databases of meth precursor purchases **electronically** to make information **sharing** among **pharmacies** more effective in stopping meth producers.

Q: What is being done to keep meth off our streets?

A: Meth producers and drug traffickers are relentless...

16/3,K/3 (Item 3 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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35096816 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**
Allscripts and SureScripts Partner to Electronically Connect Pharmacies with Physicians

BUSINESS WIRE
April
20, 2004
Journal Code: WBWE **Language:** English
Record Type: FULLTEXT
Word Count: 988

(USE FORMAT 7 OR 9 FOR FULLTEXT)
...to the Institute of Medicine, medication errors alone cause over 7,000 deaths every year. These errors could be significantly reduced with EMRs that include **electronic** prescribing.

About SureScripts

With strong support from the **pharmacy** industry, SureScripts is improving the prescribing process by creating a neutral national electronic prescribing network and by building grassroots support for the acceptance of electronic...

25/3,K/1 (Item 1 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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03475197 **(USE FORMAT 7 OR 9 FOR**

FULLTEXT)
India: 'Electronic governance' gives FDA new look

MAHESH VIJAPURKAR MUMBAI, NOV. 17.

HINDU
November 18, 1998

Journal Code: FHIN **Language:** English
Record Type: FULLTEXT
Word Count: 868

(USE
FORMAT 7 OR 9 FOR FULLTEXT)
...in the open regime, and computers grow in numbers as anticipated, a major problem in terms of information gap will vanish. It is projected that **chemists** would be **linked** later, making it a **realtime** interaction facilitating consumer protection.

Mr. P. Subrahmanyam, Chief Secretary says: "I too had a poor perception of the FDA thanks to its past. Now I...

25/3,K/2 (Item 1 from file: 15)
DIALOG(R)File 15:
ABI/Inform(R)
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02112860 66830968

State health expenditure accounts: Purposes, priorities, and procedures

Long, Stephen H; Marquis, M Susan; Rodgers, Jack
Health Care Financing Review
v21n2 pp:
25-45
Winter 1999
ISSN:
0195-8631 **Journal Code:** HCF
Word Count:
9606
Text:
...care personnel from the U.S. Bureau of the Census Current Population Survey. We used statespecific data from Medicare Hospital Cost Reports to estimate the **share** of hospital costs attributed to the **pharmacy** to adjust the hospital and pharmacy accounts. We used data from the 1993 Service Annual Survey (U.S. Bureau of the Census, 1995) on sources of physician revenues to estimate payments for prescription drugs provided in physician offices, and we transferred this **quantity** to the **prescription drug** account. We **used** state-specific data on the share of hospital facility days that are for LTC to adjust the hospital account to reflect acute care services only...

25/3,K/3 (Item 1 from file: 610)
DIALOG(R)File 610:
Business Wire
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00235628
20000316076B3900 **(USE FORMAT 7 FOR FULLTEXT)**

Novartis to Sponsor Physicians' Use of Cybear Products

Business Wire
Thursday ,
March 16, 2000 08:44 EST
Journal Code: BW
Language: ENGLISH **Record Type:** FULLTEXT
Document Type: NEWSWIRE
Word Count: 748

Text:

...secure private network to provide access to the Internet, email, and robust productivity applications available on a transaction or subscription basis to physicians, physician organizations, **pharmacies**, and hospitals. Some of its **on-line** applications include business tools for hospital messaging, lab orders and results, streamlined purchasing, prescription writing, claims processing, eligibility checking, formulary-compliance, credentialing, Web site creation...

...at www.cybear.com or by calling 877.999.3001 Novartis Pharmaceuticals Corporation (www.Pharma.us.novartis.com) researches, develops, manufactures and markets leading innovative **prescription drugs used** to treat a **number** of diseases and conditions, including central nervous system disorders, organ transplantation, cardiovascular diseases, dermatological diseases, respiratory disorders, cancer and arthritis. The company's mission is...

25/3,K/7 (Item 1 from file: 636)
DIALOG(R)File 636: Gale
Group Newsletter DB(TM)
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02431604 **Supplier Number:**
44840571 **(USE FORMAT 7 FOR FULLTEXT)**

Lilly Buy of PCS Raises More Questions About Influence Over PBMs
New Drug Buyer , v 1 , n 6 , p
N/A
July 15 , 1994
Language:

English **Record Type:** Fulltext
Document Type:
Newsletter ; Trade
Word Count: 382

**Supplier Number: (USE
FORMAT 7 FOR FULLTEXT)**

Text:
...to buy the 60 million lives - 30 million on formulary - that PCS lays claim to. But as another so-called "vertical merger" takes place, questions **remain** over **how much** influence **drug** manufacturers are buying from PBMs and whether it's beneficial to the PBMs' customers - and whether the strategy will pay off for drug makers. Lilly...

...market share for its products through its Medco merger either. Lilly's also interested in PCS for its information technology - the firm recently bought a **network** tying together doctors, **pharmacists**, labs, and managed care organizations. Ringo says Lilly knows it needs "to sell clinically and economically optimal outcomes" to its buyers. But with the three...

25/3,K/8 (Item 2 from file: 636)
DIALOG(R)File 636: Gale
Group Newsletter DB(TM)
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01322984 **Supplier Number:**
41542444 **(USE FORMAT 7 FOR FULLTEXT)**

AMERICAN EXPRESS HEALTH-CARE CREDIT CARD REPORTEDLY BEING READIED FOR FALL LAUNCH
Card News ,
v 5 , n 17 , p 8
Sept 10 , 1990

Language: English **Record Type:** Fulltext

Document Type: Magazine/Journal ; Trade
Word Count:
422
-
...new magnetic stripe card for the online processing of health claims (CN, Aug. 27, p. 8).

A plastic health-services card, with an accompanying POS **network**, is in place at **pharmacies** in Canada's Saskatchewan province to automate both the purchase of prescription drugs and claims processing (CN, April 9, p. 5). In addition, medical information can be stored on the cards. Pharmacists can determine a cardholder's eligibility for **prescription drug** plans, the **remaining amount** on any applicable health plan deductible, and the amounts that the plans and beneficiaries are to pay.

If the American Express health-care card does...

25/3,K/9 (Item 3 from file: 636)
DIALOG(R)File 636: Gale
Group Newsletter DB(TM)
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01142437 **Supplier Number:**
40924980 **(USE FORMAT 7 FOR FULLTEXT)**

**STUDY EXAMINES HEALTH CARE FINANCING ADMINISTRATION'S
REVIEW SYSTEM FOR PRESCRIPTION DRUGS**
Federal
Industry Watchdog , p N/A
Sept ,
1989
Language: English **Record
Type:** Fulltext
Document Type: Magazine/Journal ; Trade

Word Count: 214

Supplier Number: (USE FORMAT 7 FOR FULLTEXT)

Text:
...an estimated 17 percent of the elderly and provides a mechanism for checking the safety of drugs for all the elderly who use a participating **pharmacy**. This mechanism is an **electronic** drug utilization review system for prescription at the point- of-sale. The drug utilization review system function proposed by the Health Care Financing Administration (HCFA) is very basic with regard to drug information to be produced, since it will only compare **drug**-to-**drug** interactions for a limited **number** of **drugs**. Several important issues **remain** unresolved. It is also questionable whether HCFA will meet legislative objectives of being operational by January 1, 19991, and being consistent with the law's...

25/3,K/10 (Item 1 from file: 16)
DIALOG(R)File 16: Gale
Group PROMT(R)
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10040486
Supplier Number: 91059427 **(USE
FORMAT 7 FOR FULLTEXT)**

Take five pharmacies.

Community Pharmacy , p 20

Sept 2 , 2002
Language: English
Record Type: Fulltext
Document Type: Magazine/Journal ;
Trade
Word Count: 2313
-
...but the answer is not giving in, rather facing up to the responsibility to prescribe as economically as the patient's condition warrants.

If the **number** of unwanted **medicines returned** to **pharmacies** was **linked** to the mix of items prescribed in that area it would certainly make a point but GPs reps would not allow it. The evidence though...

25/3,K/11 (Item 2 from file: 16)
DIALOG(R)File 16: Gale
Group PROMT(R)
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08563412
Supplier Number: 73847845 **(USE FORMAT 7 FOR FULLTEXT)**

Mass chains chase down pharmacy sales.
FREDERICK, JAMES

Drug Store News , v 23 , n 6 , p 54

April 23 , 2001
Language: English
Record Type: Fulltext
Document Type: Magazine/Journal ;
Trade
Word Count: 780

Supplier Number: (USE FORMAT 7 FOR FULLTEXT)

Text:

The nation's big discount store chains continue to stalk a bigger **share** of the nation's **pharmacy** business, and new data suggest their efforts are succeeding. But their impact on the **total drug** store market **remains** diluted by several factors that have allowed the best traditional drug store operators to survive and even thrive in the era of Wal-Mart Stores...

25/3,K/17 (Item 2 from file: 149)
DIALOG(R)File 149: TGG
Health&Wellness DB(SM)
(c) 2009 Gale/Cengage. All rights
reserved.

01240962 **Supplier Number:**
09202997 (USE FORMAT 7 OR 9 FOR FULL TEXT)

A hard-copy look at fax pharmacy. (includes advantages and disadvantages to its use)

Perrin, Forrest V.

Drug Topics , v134 , n13 , p26(4)

July 9 ,
1990
Publication Format:
Magazine/Journal
ISSN: 0012-6616
Language: English

Record Type: Fulltext **Target Audience:** Trade
Word Count: 2943 **Line Count:**
00234
...city in the country, as well as parts of Europe.
Problems include: * The expense may be a drawback. * A patient could get hold of the **prescription** and **fax** it to any **number** of **pharmacies**. * The paper **used** now, for the most part, doesn't last much more than 18 months.

28/3,K/1 (Item 1 from file: 20)
DIALOG(R)File 20: Dialog
Global Reporter
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reserved.

34182624 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**
SureScripts and Axolotl Join Forces to Provide Physicians With Electronic Prescribing Connections

BUSINESS WIRE
March
02, 2004
Journal Code: WBWE **Language:** English
Record Type: FULLTEXT
Word Count: 580

(USE

FORMAT 7 OR 9 FOR FULLTEXT)
...pleased that Axolotl has made connecting to pharmacies a high priority," said Kevin Hutchinson, SureScripts' president and CEO. "Axolotl, a leader in the automation of **physician** practices, recognizes that electronic prescribing can significantly reduce errors and increase efficiency."

In use by physicians since 1996, Axolotl's Elysium Prescription Management system helps...

...medications including generic alternatives, tracks and maintains a patient's medication history, makes dosage adjustments, performs automatic patient eligibility and benefit checking, and provides immediate **electronic** delivery to **pharmacies**.

"Axolotl has always **taken** a total management view to **electronic prescription** writing and SureScripts Messenger Services will provide our physicians with the ability to electronically exchange new prescription and refill requests with retail pharmacies, greatly enhancing...

28/3,K/2 (Item 1 from file: 9)
DIALOG(R)File 9: Business
& Industry(R)
(c) 2009 Gale/Cengage. All rights reserved.

04155104
Supplier Number: 158213874 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**
Doing business within a new economic reality.

Drug Store News , v 29 , n 1 , p 20
January 15, 2007
Document Type: Journal
ISSN: 0191-7587 (United States)
Language: English **Record Type:** Fulltext
Word Count: 1112 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**

TEXT:
...terms of growth rates, rising 7.6 percent in dollars and 14.1 percent in units dispensed, according to industry research. Nevertheless, mail order's **total share** of the prescription market remains far behind that of **drug chains:** mail accounted for 19.1 percent of dollar **share**, compared with 41.0 percent for traditional **drug chains**, IMS and NACDS report. The discrepancy is even wider in terms of units dispensed: mail accrued just 7.2 percent of all prescriptions in 2005...

28/3,K/3 (Item 2 from file: 9)
DIALOG(R)File 9: Business
& Industry(R)
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03315935
Supplier Number: 116227903 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**
SureScripts fosters electronic prescribing.

(State Of The Industry)

Chain Drug
Review , v 26 , n 8 , p 56
April 26, 2004

Document Type: Journal **ISSN:** 0164-9914 (United States)
Language: English **Record Type:** Fulltext

Word Count: 502 **(USE FORMAT 7 OR 9 FOR FULLTEXT)**

TEXT:
...to engage in this."

Most recently SureScripts announced an e-prescribing agreement with Axolotl, which provides Web-based products and services that automate health information **management** (HIM) and communication among HIM departments, hospitals, clinics, laboratories and 13,000 physicians.

"We are pleased that Axolotl has made connecting to pharmacies a high...

...medications, including generic alternatives; tracks and maintains a patient's medication history; makes dosage adjustments; performs automatic patient eligibility and benefit checking; and provides immediate **electronic** delivery to **pharmacies**.

"Axolotl has always **taken** a total management view to **electronic prescription** writing, and SureScripts Messenger Services will provide our physicians with the ability to electronically exchange new prescription and refill requests with retail pharmacies, greatly enhancing...

34/3,K/1 (Item 1 from file: 148)
DIALOG(R)File 148: Gale Group Trade & Industry DB
(c) 2009 Gale/Cengage. All rights reserved.

13366789   **Supplier Number:** 73847845 (USE FORMAT 7 OR 9 FOR FULL TEXT)
Mass chains chase down pharmacy sales.

FREDERICK, JAMES
Drug Store News , 23 , 6 , 54

April 23 , 2001
ISSN: 0191-7587
Language: English
Record Type: Fulltext
Word Count: 780 **Line Count:** 00084

Text:
...continue to stalk a bigger share of the nation's pharmacy business, and new data suggest their efforts are succeeding. But their impact on the **total drug** store market **remains** diluted by several factors that have allowed the best traditional drug store operators to survive and even thrive in the era of Wal-Mart Stores

V. Additional Resources Searched

Financial Times FullText (via ProQuest): No relevant results.

Internet & Personal Computing Abstracts (via EBSCOhost): No relevant results.

LexisNexis: see attached file.